

The Long Journey Home X
Treatment of Posttraumatic Stress Disorder in the Department of Veterans Affairs:
Fiscal Year 2001 Service Delivery and Performance

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Executive Summary

In the decades since the end of the Vietnam conflict, the treatment of veterans suffering from war-related Posttraumatic Stress Disorder (PTSD) has become a major priority for the Department of Veterans Affairs (VA) health care system. Starting October 1, 1995, the Veterans Health Administration (VHA) of VA underwent a major reorganization into 22 semi-autonomous Veterans Integrated Service Networks (VISNs). The implementation of the VA reorganization and the budget stresses during the ensuing years have stimulated a major review of VA mental health care programs at the VAMC, VISN, and national levels. The shift of the locus of service from costly inpatient programs to more accessible outpatient and community-based clinics is a national VHA goal and continues as a major focus of activity. In the past several years the spectrum of programs for the treatment of PTSD in VA has substantially widened to include a rich array of outpatient clinics, short-term hospital programs, and non-hospital residential rehabilitation programs, gradually replacing the once widely established Specialized Inpatient PTSD Units (SIPUs). Evaluation studies have shown that long-term inpatient treatment of PTSD is not more effective than shorter term hospital treatment with outpatient follow-up care, and is considerably more costly (Fontana and Rosenheck, 1997a). These findings have stimulated significant reallocation of resources for PTSD treatment.

This summary of data on VA treatment programs for PTSD is a component of the National VA Mental Health Program Performance Monitoring System (Rosenheck and Greenberg, 2002), and has been prepared to assist clinicians, administrators and planners in their review of programmatic options for treating PTSD. Information is presented in four sections: (1) A national overview and performance assessment of PTSD treatment in VA including utilization data on both specialized and non-specialized programs; (2) A review of patients treated and services delivered by the Specialized Outpatient PTSD Programs; (3) A review of changes in VA's programmatic capacity to provide treatment for PTSD, and (4) Outcomes monitoring of Specialized Intensive PTSD Programs.

In this report we present information on:

- (1) the population of veterans residing in each VISN, including the number and percent who are service connected or low income (27.5% of all US veterans), the total number who receive VA compensation for PTSD (155,712), and the proportion who use VA mental health services annually (9.4% of all eligible veterans; 59.7% of all those service connected for PTSD);
- (2) the distribution of specialized PTSD programs, and their funding, across VISNs (there are 147 specialized programs nationwide, ranging from 3-13 per VISN);
- (3) population coverage and workload of specialized *outpatient* PTSD programs (57,783 veterans were seen in FY 2001, an 8.6% increase over FY 2000, and 44,300 veterans were treated (seen more than once) in FY 2001, an 8.2% increase over FY 2000);

- (4) workload and cost data on treatment provided by specialized *outpatient* PTSD programs (there were 563,150 visits in FY 2001, a 4.3% increase over FY 2000; the average cost per visit was \$76 and the average cost per capita was \$969);
- (5) population coverage and utilization of *inpatient* treatment for PTSD (VA Census data show 276 occupied general psychiatry *beds* are used to treat veterans with a primary diagnosis of PTSD, an 8.2% increase from FY 2000, constituting 7.2% of all general psychiatry beds. Discharge data show a total of 7597 *episodes* of inpatient treatment for PTSD in FY 2001, compared to 8271 in FY 2000, an 8.1% decrease);
- (6) workload and cost data on treatment provided by *specialized* inpatient and residential PTSD programs (there were 5012 admissions in FY 2001 at an average cost of \$4679 per admission and \$129 per day);
- (7) a summary PTSD performance score which evaluates each VISN on its delivery of both inpatient and outpatient PTSD services;
- (8) the characteristics of patients treated in VA's specialized outpatient PTSD programs;
- (9) changes in PTSD program workload, staffing and costs during the past two years, and
- (10) outcomes of PTSD treatment in specialized intensive programs;
- (11) the total number of outpatients treated for PTSD in the VA system broken out by whether they received treatment in a specialized PTSD program (57,783), from a PTSD specialist (13,184), from a mental health program other than the above (97,541), or from a non-mental health program (35,362) [see Appendix E].

For ease of reference, Appendix B presents the goals for the Special Emphasis Programs for PTSD as introduced in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*, and as modified subsequently with the approval of the Clinical Quality Improvement Specialist, Office of Performance and Quality, VA Headquarters.

PTSD is one of the most prevalent of war-related illnesses. Providing high quality treatment for PTSD will remain a top priority for VA as it builds on the clinical experience and expertise it has developed during the past decade. The data presented here suggest considerable variability across VISNs in the delivery of some PTSD services. It is the task of thoughtful planning, performance assessment, and clinical care to assure that, as VA passes through a period of major change during the years to come, the treatment provided to veterans with PTSD is equitably distributed, accessible, effective and, efficient.

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Treatment of Posttraumatic Stress Disorder in the Department of Veterans Affairs

In the decades since the end of the Vietnam conflict, the treatment of veterans suffering from war-related Posttraumatic Stress Disorder (PTSD) has become a major priority for the Department of Veterans Affairs (VA) health care system. With both clinical recognition and clear scientific demonstration that the effects of war zone trauma can be long lasting and severe (Wilson & Raphael, 1994; Kulka et al., 1990), VA has increasingly directed substantial clinical, educational, and research resources towards treatment of the only psychiatric illness directly related to war-zone experience.

For many thousands of veterans, PTSD is a chronic disorder resulting directly from their military service that causes substantial psychological suffering and social disability. The national network of specialized PTSD programs that has been established by VA is unique in the world. Studies have shown that veterans are very well pleased with the services received, significantly more so than they are with services from nonspecialized psychiatry programs (Fontana & Rosenheck, 1996a). The availability of specialized PTSD programs is an important indicator of the quality of health care provided by VA. At the close of FY 2001, VA's specialized outpatient programs for PTSD consisted of 107 clinical teams: 96 PTSD Clinical Teams (PCTs), 6 Substance Use PTSD Teams (SUPTs) and 5 Women's Stress Disorder Treatment Teams (WSDTTs). At the close of FY 2001, VA's specialized intensive programs for PTSD consisted of 5 Evaluation and Brief Treatment Units (EBTPUs), 14 PTSD Residential Rehabilitation Programs (PRRPs), 7 PTSD Day Hospitals, 6 PTSD Domiciliary (PTSD Dom) (which replaced the PTSD/Substance Abuse Unit), 6 Specialized Inpatient PTSD Units (SIPUs), 1 dual-diagnosis PTSD Day Hospital with a substance abuse component (DHsa), and 1 Women's Trauma Recovery Program (WTRP). The central mission of these teams as defined by Headquarters and the VA Special Committee on PTSD is to provide specialized PTSD treatment services to underserved veterans with PTSD due to military-related trauma.

Since 1988, the Northeast Program Evaluation Center, which also serves as the Evaluation Division of the National Center for PTSD, has been monitoring and evaluating the implementation and performance of specialized VA programs for the treatment of war-zone related PTSD under the auspices of VA's Strategic Health Care Group for Mental Health (Fontana, Rosenheck & Spencer, 1990, 1991, 1993; Fontana, Rosenheck, Spencer, & Gray, 1995; Fontana & Rosenheck, 1994, 1996a; Rosenheck & Fontana, 1994a, 1994b, 1996).

Reorganization of the Veterans Health Administration (VHA)

Over five years ago, in October 1995, the Veterans Health Administration (VHA) of VA underwent a major reorganization into 22 semi-autonomous Veterans Integrated Service Networks (VISNs) (Kizer, 1995). The 22 VISNs are charged with developing cost-effective health care programs that are responsive to both the national mission of the Department of Veterans Affairs and to local circumstances and trends in health care service delivery. The implementation of the VA reorganization, and the anticipation of possible budget reductions during the coming years, has stimulated a major review of VA health care programs (mental health programs among them) at the VAMC, VISN, and national levels. The shift of the locus of

service from costly inpatient programs to more accessible outpatient and community-based clinics has been identified as a national corporate goal and is emerging as a major goal of planning at the VISN level.

Organizational change is invariably a complex and difficult process. Clear, accurate and relevant data are essential to the success of such a process. In this summary report we have assembled a variety of types of information on the operation of VA's PTSD treatment programs to aid clinicians and administrators at various stages of planning for the future of VA treatment of PTSD.¹

Structure, Process and Outcome in the Evaluation of Health Care Service Delivery

For the past 20 years, the evaluation of health care systems has been conceptualized as assessing three dimensions of care: (1) structure, the resources needed to provide care, (2) process, the delivery of services, and (3) outcome, the impact of treatment on the well-being of patients (Donabedian, 1988). The data presented in sections I - III of this report primarily focus on structure and process of treatment and on population-based rates of service utilization. Outcome has been addressed extensively in previous and ongoing studies conducted at NEPEC, and in Part IV of this report. The first of these studies addressed the performance of VA's PTSD Clinical Teams in considerable breadth and depth (Fontana, Rosenheck & Spencer, 1990, 1991, 1993; Fontana, Rosenheck, Spencer, & Gray, 1995; Fontana & Rosenheck, 1996a). Evaluation data showed that the programs were serving their intended target population and that treatment was associated with significant improvement in PTSD symptoms and other life domains. Further, a major study of the cost and effectiveness of different approaches to inpatient PTSD treatment has been published (Fontana & Rosenheck, 1996a, 1997a; Rosenheck & Fontana, 1995b). In addition, a comprehensive outcome monitoring system has been implemented for inpatient PTSD treatment at 62 VA medical centers (Fontana & Rosenheck, 1997b), and additional outcome data are presented in Part IV of this report.

A recent discussion of health care performance assessment in cardiac surgery in VA, however, has refocused attention away from the "tyranny of outcomes" (Berwick, 1988) by drawing attention to the fact that outcomes can only be influenced by changes in clinical process and clinical structures (Hammermeister et al., 1995). There is thus substantial need for basic information on the structure and process of PTSD treatment, in addition to data on outcome performance. Issues of basic structure and program design are especially important since they have the greatest impact on total service costs. With anticipated reductions in Medicare and Medicaid funding and the growth of the number of Americans without health care coverage continuing at a rate of 1 million persons per year, VA will become the provider of last resort for an increasing number of veterans. This is especially true in the mental health area, in which major reductions in funding for State Mental Health Agencies have been under way for several

¹ This report is part of a larger effort to provide VA managers with data on performance in the mental health area and is part of a more general National Mental Health Program Performance Monitoring system that addresses the core aspects of VA mental health care, including both specialized and non-specialized programs (Rosenheck & Greenberg, 2001).

years. It will thus be important to maximize the efficiency of service delivery if VA is to expand its treatment capacity to help the growing number of eligible veterans for whom it is the provider of last resort.

A recent national survey of veterans examined why veterans chose to use VA services and found that while 19.4% of VA system users reported low cost as the main reason, the second largest proportion (18.4%) chose VA because it "provided services not found elsewhere" (US Department of Veterans Affairs, 1995, p. 53). Several other studies have found that veterans with war zone service (Rosenheck & Massari, 1993) and, more specifically, Vietnam veterans with PTSD (Rosenheck & Fontana, 1995a) are significantly more likely to use VA rather than non-VA mental health services. VA services for PTSD are thus likely to be in high demand during the coming years and major efforts are needed to assure that services are available to the greatest extent possible.

PART I: AN OVERVIEW OF VA TREATMENT OF PTSD

Population Characteristics

Table 1 presents basic information on the population of veterans in each VISN, on the number who are eligible for VA services, the number and proportion who are service connected for a psychiatric disorder, and who are specifically service connected for PTSD. While there are substantial differences in the total veteran population in each VISN, differences in the proportions who are eligible for VA services or who are service connected are small to moderate. More detailed data on sociodemographic characteristics of veterans in each VISN are available in the report on the full mental health monitoring system (Rosenheck & Greenberg, 2001).

Additional data on use of *VA mental health services* among all veterans and, more specifically, among those service-connected for PTSD are also presented in Table 1. Here too variations in population coverage between VISNs are modest, as evidenced by the small coefficients of variation (the standard deviation of the mean of all VISNs divided by the mean of all VISNs). Outlier values are defined as those that are 1 standard deviation below the mean of all VISNs, reflecting especially low population coverage, and are indicated by being framed in Table 1.²

Specialized Treatment Programs for PTSD in VA

The initial task for system planners is to identify the location and distribution of existing programs. VA programs that treat patients with PTSD can be divided into two types: general psychiatry programs and "specialized programs." General programs are standard VA inpatient and outpatient programs that treat veterans with PTSD in the same settings in which they treat veterans with other mental health problems. The "specialized programs" are staffed by experts who have concentrated their clinical work in the area of PTSD treatment. Such specialization has long been recognized as an essential feature in treatment of war-related PTSD. Treatment of PTSD requires specific familiarity with the kinds of trauma veterans encountered in various US wars, and special skills and experience to address the effects of these traumas.

Tables 2-3 present summary information on the number and types of specialized PTSD programs in each VISN and at each medical center. VISNs with especially small numbers of specialized programs are framed in Table 2. Table 2a shows changes from FY 2000- FY 2001 in the number of programs operating in each VISN. There was a net gain of 9 PCTs, 1 WSDTT and 5 PTSD Doms, and a net loss of 1 SUPT, 4 PRRPs, 2 PTSD Day Hospitals and 1 SIPU. The number of EBTPUs, DHsa and WTRP remained the same. Additional data on changes in program staffing are presented in Part III of this report.

Tables 4-5 present data on FY 2001 expenditures by VISN and by each of these

²One standard deviation is used as the criterion for identifying outliers throughout Part I. Since most comparisons reported here are one-tailed, one standard deviation identifies the extreme 15% of each distribution.

programs. Fiscal data presented in Tables 4 and 5 reflect expenditure of special Congressionally appropriated funds along with locally generated funds for PTSD treatment as reported by each medical center in its annual program summary to NEPEC. These data are combined in Table 4 with population data to evaluate population-based per capita spending on specialized PTSD treatment in each VISN. While these funds account for the great majority of expenditures on specialized PTSD outpatient programs, they often constitute only part of the funding of inpatient programs. Bolding/underlining is used to indicate VISNs that spend especially high proportions of special funds on inpatient care. Framed values reflect low per capita levels of funding.

In past reports, Table 6 presented data from VA's Cost Distribution report (CDR) on all VA expenditures for inpatient PTSD programs (including both locally allocated funds and funds allocated by a peer review process from special Congressionally appropriated funds). Separate cost centers for these programs were initiated in FY 1994 and many sites have not fully used these cost centers in their CDR distributions. As a result, substantial discrepancies have been observed in some instances between total funding as reported on the CDR, and total funding as reported in annual program reports to NEPEC. These data were presented in Long Journey Home in the past, in part, to stimulate more careful reporting of expenditures in the proper cost accounts in the CDR. Unfortunately, incongruities between the CDR reports and the annual program reports continue to exist and reliable data for FY 2001 were not available. For this reason, Table 6 is not included in this year's report.

Specialized PTSD Outpatient Programs

Tables 7 through 8 present summary workload data on the work of specialized PTSD outpatient clinics: the PTSD Clinical Teams (PCT) program, the Substance Use PTSD Teams (SUPT) program, and the Women's Stress Disorder Treatment Teams (WSDTT) program. Table 7 presents basic information from computerized VA workload data (the outpatient file) on the number of veterans treated, the number of visits received, and the number of visits per veteran for PCTs and SUPTs in each VISN. Data are also presented (Table 7a) on workload changes from FY 2000 to FY 2001. Overall these programs saw 8.6% more patients in FY 2001 than in FY 2000; the intensity of contact decreased as evidenced by the 4.0% decrease in number of visits per veteran.

Table 8 presents workload data for specialized PTSD programs by medical center within each VISN. Teams that saw especially low numbers of veterans in FY 2001, or that deliver low intensity services, are framed.

Inpatient and Residential Treatment of PTSD

As noted above, inpatient treatment of PTSD in VA takes place in both specialized programs for PTSD and general psychiatry programs. National VA workload data do not allow differentiation of treatment in different types of PTSD programs, although new bed section codes, introduced in FY 1994, will allow such differentiation in the future. In this section we first present data on inpatient and residential PTSD treatment overall, without differentiating various types of specialized programs. Data on specialized programs are presented subsequently.

Census Data. Tables 9 and 10 present data from the FY 2001 end-of-year national census of VA inpatients (conducted on patients hospitalized at midnight on September 30). Table 9 presents data on the number of occupied general psychiatry beds³ in each VISN and the number and proportion of beds occupied by patients whose primary diagnosis is PTSD (ICD-9 code 309.81). This year data are also presented on the number of occupied domiciliary and PRRP beds in each VISN and the number and proportion of beds occupied by patients whose primary diagnosis is PTSD (ICD-9 code 309.81). Data are also presented on the length of stay for these patients *up to the time of the census*.⁴ Since these are one-day cross-sectional data it should be borne in mind that they weight data from long-stay patients more heavily than data averaging care delivered during the entire year (e.g., the data presented in Tables 11, 11-2, 12, and 12-2). VISNs with especially long lengths of stay for PTSD (1 standard deviation above the mean of all VISNs) are signaled by bolding/underlining. Table 9 also presents population data on beds per capita among eligible veterans in the general population. VISNs with especially high numbers of beds per capita occupied by PTSD patients are bolded/underlined, while VISNs with especially low numbers of PTSD beds per capita are framed. While the advantage of census data is that they present information on occupied beds, the representativeness of a one-day sample is limited. Additional information is available, however, from the discharge abstract file -- the Patient Treatment File (PTF). Table 9a presents data on changes from FY 2000- FY 2001 in beds devoted to PTSD treatment. There was a 7.0% decline in the total number of general psychiatry beds in VA; a 16.4% increase in the proportion of general psychiatry beds used for PTSD treatment; and a 7.4% increase in length of stay. There was a 6.1% decrease in the total number of domiciliary and PRRP beds in VA; a 5.8% increase in the proportion of domiciliary and PRRP beds used for PTSD treatment; and a 4.5% decline in length of stay.

Discharge Abstract Data. Tables 11, 11-2, 12, and 12-2 present data on all completed episodes of inpatient, domiciliary, and PRRP treatment in FY 2001. Data are presented on the total number of discharges for all diagnoses, and average length of stay⁵. Data are also presented on the unique (unduplicated) veterans treated and their cumulative bed days of care during the year. The next two columns present the proportion of all episodes of care and the proportion of all unique veterans who received inpatient treatment for PTSD. VISNs treating especially low proportions of PTSD patients are indicated by framed values. The next series of columns present data on average length of stay, and cumulative days per veteran per year for PTSD treatment. VISNs with long stays and high bed days of care for inpatient utilization are marked by bolding/underlining.

³ Bed section codes 70-71, 75-79, 89 and 91-93. Domiciliary, PRRP and Hoptel care are not included.

⁴ These data are truncated at 365 days to reflect care delivered during FY 2001 only.

⁵ These measures are also truncated at 365 days, as are the cumulative bed days of care, described below. Very few PTSD patients have such long lengths of stay minimizing censoring problems in these data.

The next pair of columns presents data on the *ratio* of average length of stay and cumulative bed days of care for PTSD to average length of stay and cumulative bed days of care for all general psychiatry patients. These ratios reflect systematic differences in patterns of inpatient care for PTSD as compared to inpatient care for all psychiatric disorders. High values are marked by bolding/underlining. Finally, Table 11-2 presents data on the number of episodes of PTSD treatment per Category A veteran in the general population, for each VISN. Equivalent data are presented by VAMC in Tables 12 and 12-2 (although population-based treatment estimates are not available for individual medical centers).

Tables 11a and 11b present data on the change from, FY 2000 to FY 2001, in the number and percent of patients receiving treatment for PTSD in general psychiatry inpatient beds and PRRP and domiciliary beds. VA provided a total of 7,597 episodes of inpatient treatment for PTSD in FY 2001 compared to 8,271 in FY 2000, a 8.1% decrease. Average length of stay increased slightly from 13.4 in FY 2000 to 13.6 in FY 2001, a 1.5% increase. A total of 3,580 episodes of domiciliary and PRRP treatment for PTSD was provided in FY 2001 compared to 3,823 in FY 2000, a 6.4% decrease. Average length of stay increased from 50.2 in FY 2000 to 52.9 in FY 2001.

Specialized Inpatient PTSD Programs

Tables 2 and 3 presented data on the distribution of four different types of inpatient PTSD programs in VA; Specialized Inpatient PTSD Units (SIPUs); the PTSD Domiciliary (PTSD Dom) (which replaced the PTSD/Substance Abuse Unit), PTSD Substance Abuse Units (PSUs); PTSD Residential Rehabilitation Programs (PRRPs) and Evaluation and Brief Treatment PTSD Units (EBTPUs). In this section we present additional information on these specialized programs from annual program summaries submitted to NEPEC.

As with Table 6, Table 13 is not being presented this fiscal year. Table 13 contained data on the number of operating beds and the number of admissions to specialized programs, based on data from annual report submissions to NEPEC. Additional data were presented from the CDR report of the current fiscal year. As noted with Table 6, many medical centers have not yet fully implemented procedures for accurately distributing costs to specific PTSD programs on the CDR. Because this is case, reliable data were unavailable for FY 2001 and Table 13 is not included in this report.

Performance Data on PTSD Treatment in VA

Tables 14-20 present performance assessment data on VA treatment of PTSD, by VISN and by VAMC. These data address both inpatient and outpatient care provided to an unduplicated sample of *all* veterans discharged from general psychiatry inpatient units (which include the specialized inpatient PTSD units) with a primary diagnosis of PTSD between October 1, 2000 and March 31, 2001.⁶ The monitors focus on service use and outcomes during the six months

⁶ These data thus differ from those presented above in that they are based on a more intensively studied sample, which includes only veterans discharged during the first half of the fiscal year, about half of the unique veterans whose care was addressed in Tables 11-12.

after the initial discharge. These measures are based on those used to evaluate performance in all VA mental health programs and are described more fully in VA's National Mental Health Program Performance Monitoring System (Rosenheck & Greenberg, 2001).

Inpatient Performance. Tables 14 and 15 present data on inpatient care, by VISN and by VAMC, that include:

- (1) the number of unduplicated veterans discharged with a diagnosis of PTSD,
- (2) the average length of stay of the index episode,
- (3) bed days of psychiatric care during the six months after discharge,
- (4) the change in bed days of psychiatric care from the six months before discharge to the six months after discharge,
- (5) the number of additional psychiatric hospital discharges during the six months after the index discharge,
- (6) readmission rates to general psychiatry bed sections at 14 days, 30 days and 180 days, after discharge, and
- (7) the number of days to first readmission among those readmitted to psychiatry bed sections.

Outlier performance is defined, for descriptive purposes, as any value that is 1 standard deviation from the mean of all VISNs (and all VAMCs, where indicated). Such outliers are identified in Tables 14 and 15 by framed values. A summary inpatient performance score for each VISN is derived by averaging the standard scores across all measures (see last column of Table 14).⁷

Outpatient Performance. Tables 16 and 17 present data on outpatient care among discharged veterans, by VISN and by VAMC, that include:

- (1) the proportion of discharged veterans who received any VA outpatient general psychiatric treatment during the 6 months following discharge,
- (2) the proportion of discharged veterans who received any VA outpatient general psychiatric treatment during the 30 days following discharge,

⁷These standard scores are z-scores, the site mean less the average of all site means divided by the standard deviation of all site means. Some measures are weighted more heavily in these averages than others, based on their importance and independence of other measures. Measures that address common factors (such as the readmission rates at 14, 30 and 180 days) are combined to form one measure in the overall average. For a full explanation of methods used for combining performance measures see Rosenheck & DiLella, 1998.

- (3) the number of days from discharge to the first general psychiatric visit during the six months after the index discharge, among those with at least one such visit,
- (4) the number of general psychiatric visits received by veterans who received at least one visit during the 6 months following discharge,
- (5) continuity of care, as measured by the number of two month periods (during the first six months after discharge) in which the veteran received two or more general psychiatry outpatient visits,
- (6) the proportion of veterans with a secondary diagnosis of alcohol or drug abuse in addition to their primary diagnosis of PTSD,
- (7) receipt of any substance abuse services during the six months following discharge,
- (8) the ratio of the proportion of veterans who received substance abuse treatment to the proportion who were dually diagnosed, and
- (9) the number of substance abuse outpatient services received during those six months among those who received any outpatient substance abuse services.⁸

Outlier performances are defined, as above, as a mean performance that is 1 standard deviation from the mean of all VISNs or all VAMCs and are identified in Tables 16 and 17 by framed values. As above, a summary outpatient performance score is derived by averaging the standard scores across all pertinent measures and is presented in the last column of Table 16 (see note 8, for details).

Outpatient Continuity of Care. Tables 16A-16B and Tables 17A-17B present a series of monitors that address continuity of care provided to outpatients with PTSD within the outpatient treatment setting. Thus, in contrast to the conventional HEDIS measures that evaluate the timeliness of entry into outpatient treatment following discharge from the hospital, these measures address continuity of care among patients with PTSD during the six months following their first outpatient visit in each fiscal year. These address the number of visits, the distribution of those visits across time, and the number of different providers involved. It is assumed that seriously mentally ill patients are best served by having regular contacts with the same provider over an extended period of time.

Continuity of care is widely regarded as a crucial ingredient in the treatment of patients with severe mental illness (Bachrach, 1981). A recent review of the literature on continuity of care for people with severe mental illness identified two broad components of continuity of care for such

⁸ General psychiatry outpatient visits (which include visits to specialized PTSD outpatient programs) are defined by outpatient file stop codes 501-506; 509-510; 515-516, 520-521, 525, 529, 531, 540-541; 550-554, 557-558; 561-563; 573-578; and 580-581. Substance abuse outpatient visits are defined by stop codes 507-508; 513-514; 517-519; 522-523; 555-556, 560.

patients: (1) a cross sectional component involving adequate communication between providers and access to a comprehensive array of needed services; and (2) a longitudinal component involving continuous contact over time, constancy of service providers, continuity through discharges and transfers and implementation of service plans (Johnson S. et al., 1997). We have developed a series of measures that specifically address several aspects of the longitudinal component of continuity of care.

The sample examined for this monitor includes all veterans who had at least two visits in a specialty outpatient clinic (500 series DSS identifier) in which the primary diagnosis was PTSD (ICD 9 code 309.81). Data were then compiled from the encounter forms on all mental health specialty visits and all unique providers seen by the veteran during the 6 months following the first contact of the year. These data were used to construct indicators that reflect: (1) the number of outpatient visits, (2) the number of different days on which the veteran had an outpatient visit; (3) the number of two-month periods in which the veteran had 2 or more visits (range 0-3); (4) the number of months in which the veteran had one mental health visit; and (5) whether the veteran concluded treatment, defined operationally as having no specialty mental health visits for 6 months. In addition two composite indices of continuity of care based on both the number of visits and the number of providers were constructed. The first of these measures, (6) the Continuity of Care (COC) index is based in the following formula developed by Bice and Boxerman (1977):

$$COC = \frac{\sum_{j=1}^s n_j^2 - n}{n(n-1)}$$

where n equals the total number of visits and n_j is the total visits to the j^{th} provider.

This measure generates a continuity of care score from 0-1, with one representing more visits with fewer providers and zero represents few visits with each of several providers.

The second index (7) is the Modified Modified Continuity Index (MMCI) developed by Magill and Senf (1987):

$$MMCI = \frac{1 - (n \text{ of providers} / [n \text{ of visits} + 0.1])}{1 - (1 / [n \text{ of visits} + 0.1])}$$

This index takes a somewhat different approach to calculating a measure based on a 0-1 scale in which one represents more visits with fewer providers and zero represents few visits with numerous providers. After risk adjustment for patient demographic and diagnostic characteristics, standardized scores of these seven measures are averaged to represent an overall index of continuity of care among seriously mentally ill VA outpatients receiving services from specialty mental health clinics.

Overall PTSD Performance Score

An overall PTSD performance score is presented in Table 18. This score averages the two summary outpatient scores (for which desirable performance is in the positive direction) from Table 16 and Table 16A, with the negative of the inpatient score presented in Table 14. The sign of the inpatient score is reversed because the direction of desirable performance on the inpatient summary score presented in Table 14 is in the negative direction. Positive scores on the overall inpatient and outpatient PTSD performance score thus reflect high outpatient service provision/outcome and low inpatient service provision/outcome while negative scores reflect the opposite -- high levels of inpatient utilization/outcome and readmission, and low outpatient service delivery -- a pattern which runs counter to VA corporate goals (Kizer, 1995).

Out-of-VISN Treatment

As a result of their specialized focus, PTSD programs sometimes treat patients who reside in other VISNs. Tables 19 and 20 present data on the proportion of veterans who received treatment for PTSD, but reside outside of the VISN in which they were treated. For comparison, data are also presented on the proportion of such "in-VISN" veterans among those who were discharged from general psychiatry units but whose primary diagnosis was not PTSD, and among those who were discharged from substance abuse units. These data have not changed substantially since FY 2000.

Treatment of PTSD Outside of Specialized Programs

For ease of reference, Appendix E presents information regarding differentiation of treatment in different types of settings as specified in VHA Directive 2000-004, "Definition of Levels of Specialization in Post-Traumatic Stress Disorder (PTSD) Services". This directive delineates the types of outpatient PTSD services available in VA.

Appendix E Table E1 presents the total number of veterans receiving outpatient PTSD treatment in the VA system broken out by whether they received treatment in a specialized outpatient PTSD program (57,783), from a PTSD specialist (19,520), from a mental health program other than the above (133,741), or from a non-mental health program (12,009), by VISN, for FY 2001. Table E2 presents the total number of veterans receiving outpatient individual and group treatment from PTSD specialists by facility, for FY 2001. Table E2 also indicates if a Specialized Outpatient PTSD Program (SOPP, PCT, SUPT or WSDTT) was operating at each of those facilities during FY 2001.

Table 1. Veteran Population Characteristics and Use of VA Services (from 1990 Census and VA Workload and C&P Files, FY 2001).

VISN	Total Vet Population (SC/Low Inc)		Percent SC/ Low Inc#	Total Vets SC for Psych.	Percent SC/ Psych#	SC PTSD	Percent SC/PTSD#	<u>Used VA MH Svces.</u>		<u>PCT Used VA MH Svces.*</u>	
								All Vets	SC PTSD	Of SC/ Low Income	Of SC PTSD
1	1,500,892	358,094	23.9%	30,680	2.0%	9,703	0.65%	37,778	5,861	10.5%	60.4%
2	697,421	194,415	27.9%	11,734	1.7%	4,024	0.58%	18,568	2,404	9.6%	59.7%
3	1,595,593	335,211	21.0%	26,976	1.7%	7,417	0.46%	30,449	4,418	9.1%	59.6%
4	1,819,870	497,402	27.3%	26,576	1.5%	8,685	0.48%	36,509	5,354	7.3%	61.6%
5	857,564	168,218	19.6%	9,843	1.1%	3,146	0.37%	17,650	1,897	10.5%	60.3%
6	1,251,189	360,885	28.8%	22,271	1.8%	7,466	0.60%	32,233	4,367	8.9%	58.5%
7	1,367,528	399,439	29.2%	25,755	1.9%	9,793	0.72%	39,623	6,323	9.9%	64.6%
8	1,634,357	482,839	29.5%	42,664	2.6%	9,449	0.58%	64,151	6,060	13.3%	64.1%
9	1,060,416	367,654	34.7%	21,120	2.0%	7,354	0.69%	32,462	4,696	8.8%	63.9%
10	1,151,473	318,983	27.7%	15,736	1.4%	4,283	0.37%	32,419	2,489	10.2%	58.1%
11	1,651,186	427,356	25.9%	17,858	1.1%	4,279	0.26%	28,880	2,501	6.8%	58.4%
12	1,362,314	319,235	23.4%	14,589	1.1%	4,319	0.32%	27,011	2,583	8.5%	59.8%
13	707,005	210,110	29.7%	11,203	1.6%	3,844	0.54%	18,620	2,419	8.9%	62.9%
14	516,075	153,798	29.8%	6,648	1.3%	2,308	0.45%	10,999	1,237	7.2%	53.6%
15	1,071,604	329,293	30.7%	15,386	1.4%	5,649	0.53%	28,286	3,509	8.6%	62.1%
16	1,887,301	651,983	34.5%	39,728	2.1%	15,685	0.83%	61,826	9,445	9.5%	60.2%
17	1,026,699	321,378	31.3%	18,319	1.8%	6,865	0.67%	27,890	4,247	8.7%	61.9%
18	842,132	276,151	32.8%	16,489	2.0%	6,821	0.81%	29,464	4,145	10.7%	60.8%
19	731,842	215,445	29.4%	12,170	1.7%	5,384	0.74%	20,176	3,093	9.4%	57.4%
20	1,191,422	342,926	28.8%	22,879	1.9%	12,302	1.03%	35,925	6,599	10.5%	53.6%
21	1,418,772	338,504	23.9%	20,148	1.4%	9,662	0.68%	31,548	5,290	9.3%	54.8%
22	1,841,007	418,847	22.8%	20,748	1.1%	7,274	0.40%	41,873	4,078	10.0%	56.1%
ALL VA	27,183,662	7,488,166	27.5%	449,520	1.7%	155,712	0.57%	704,340	93,015	9.4%	59.7%
AVERAGE	1,235,621	340,371	27.8%	20,433	1.6%	7,078	0.58%	32,015	4,228	9.4%	59.7%
SD	397,725	113,743	4.0%	8,868	0.4%	3,142	0.18%	12,375	1,876	1.4%	3.1%
CV	0.32	0.33	0.14	0.43	0.23	0.44	0.32	0.39	0.44	0.15	0.05

* Outlined values are 1 s.d. below the mean of all VISNs and highlight VISNs with low population coverage.

Percentages based on total veteran population living in the VISN.

Table 2. SPECIALIZED PTSD PROGRAMS, BY VISN: FY 2001

VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER	SUM VISN*
1	6	2	1	0	2	0	1	1	0	0	13
2	2	0	0	0	0	0	1	0	0	0	3
3	5	0	0	0	0	1	1	0	0	0	7
4	3	1	0	0	0	0	2	0	0	0	6
5	3	0	0	1	0	1	0	0	0	0	5
6	5	0	0	0	0	0	0	2	0	0	7
7	7	0	0	0	1	0	0	0	0	0	8
8	4	1	0	0	0	1	1	0	0	0	7
9	4	0	0	0	0	0	0	0	0	0	4
10	5	0	1	0	3	0	0	0	0	1	10
11	5	0	0	0	0	0	0	1	0	0	6
12	2	0	1	0	0	1	2	0	0	0	6
13	3	1	0	0	0	0	0	0	0	0	4
14	4	0	0	0	0	0	1	0	0	0	5
15	5	0	0	0	0	0	0	1	0	0	6
16	7	0	1	1	0	1	2	0	0	0	12
17	5	0	0	0	0	0	1	0	0	0	6
18	5	0	0	1	0	0	0	0	0	0	6
19	3	0	0	0	1	0	0	0	0	0	4
20	4	0	0	2	0	1	0	1	0	0	8
21	4	1	0	0	0	0	2	0	1	0	8
22	5	0	1	0	0	0	0	0	0	0	6
ALL VA	96	6	5	5	7	6	14	6	1	1	147
AVERAGE	4	0	0	0	0	0	1	0	0	0	7
SD	1	1	0	1	1	0	1	1	0	0	2

PCT = PTSD Clinical Team

SUPT = Substance Use Treatment Team

WSDTT = Women's Stress Disorder Treatment Team

EBTPU = Evaluation & Brief Treatment Unit

PTSD DH = PTSD Day Hospital

PTSD DOM = PTSD Domiciliary

PRRP = PTSD Residential Rehabilitation Program

SIPU = Specialized PTSD Inpatient Unit

WTRP = Women's Trauma Recovery Program

OTHER = Refers to a Specialized Intensive PTSD Program with a substance abuse unit.

* Outlined values are 1 s.d. below the mean of all VISNs and highlight VISNs with low numbers of specialized PTSD programs.

Table 2a. VA SPECIALIZED PTSD PROGRAMS BY VISN: FY 2000, FY 2001 and FY 2000-2001 change.

Fiscal Year 2001												SUM
VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER		VISN*
1	6	2	1	0	2	0	1	1	0	0		13
2	2	0	0	0	0	0	1	0	0	0		3
3	5	0	0	0	0	1	1	0	0	0		7
4	3	1	0	0	0	0	2	0	0	0		6
5	3	0	0	1	0	1	0	0	0	0		5
6	5	0	0	0	0	0	0	2	0	0		7
7	7	0	0	0	1	0	0	0	0	0		8
8	4	1	0	0	0	1	1	0	0	0		7
9	4	0	0	0	0	0	0	0	0	0		4
10	5	0	1	0	3	0	0	0	0	1		10
11	5	0	0	0	0	0	0	1	0	0		6
12	2	0	1	0	0	1	2	0	0	0		6
13	3	1	0	0	0	0	0	0	0	0		4
14	4	0	0	0	0	0	1	0	0	0		5
15	5	0	0	0	0	0	0	1	0	0		6
16	7	0	1	1	0	1	2	0	0	0		12
17	5	0	0	0	0	0	1	0	0	0		6
18	5	0	0	1	0	0	0	0	0	0		6
19	3	0	0	0	1	0	0	0	0	0		4
20	4	0	0	2	0	1	0	1	0	0		8
21	4	1	0	0	0	0	2	0	1	0		8
22	5	0	1	0	0	0	0	0	0	0		6
ALL VA	96	6	5	5	7	6	14	6	1	1		147
AVERAGE	4	0	0	0	0	0	1	0	0	0		7
SD	1	1	0	1	1	0	1	1	0	0		2

Fiscal Year 2000												SUM
VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PSU†	PRRP	SIPU	WTRP	OTHER		VISN*
1	6	2	1	0	2	0	1	1	0	0		13
2	2	0	0	0	0	0	1	0	0	0		3
3	4	0	0	0	0	0	2	0	0	0		6
4	3	1	0	0	0	0	2	0	0	0		6
5	3	0	0	1	0	0	1	0	0	0		5
6	4	0	0	0	0	0	0	2	0	0		6
7	7	0	0	0	2	0	0	0	0	0		9
8	4	1	0	0	0	0	2	0	0	0		7
9	5	0	0	0	0	0	0	0	0	0		5
10	4	0	1	1	2	0	1	0	0	1		10
11	4	0	0	0	0	0	0	1	0	0		5
12	2	0	0	0	0	1	2	0	0	0		5
13	2	1	0	0	1	0	0	0	0	0		4
14	4	0	0	0	0	0	1	0	0	0		5
15	5	0	0	0	0	0	0	1	0	0		6
16	6	1	1	1	1	0	2	0	0	0		12
17	4	0	0	0	0	0	0	1	0	0		5
18	4	0	0	0	0	0	0	0	0	0		4
19	3	0	0	0	1	0	0	0	0	0		4
20	3	0	0	2	0	0	1	1	0	0		7
21	4	1	0	0	0	0	2	0	1	0		8
22	4	0	1	0	0	0	0	0	0	0		5
ALL VA	87	7	4	5	9	1	18	7	1	1		140
AVERAGE	4	0	0	0	0	0	1	0	0	0		6
SD	1	1	0	1	1	0	1	1	0	0		3

Change in Number of Programs												SUM
VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER		VISN*
1	0	0	0	0	0	0	0	0	0	0		0
2	0	0	0	0	0	0	0	0	0	0		0
3	1	0	0	0	0	1	-1	0	0	0		1
4	0	0	0	0	0	0	0	0	0	0		0
5	0	0	0	0	0	1	-1	0	0	0		0
6	1	0	0	0	0	0	0	0	0	0		1
7	0	0	0	0	-1	0	0	0	0	0		-1
8	0	0	0	0	0	1	-1	0	0	0		0
9	-1	0	0	0	0	0	0	0	0	0		-1
10	1	0	0	-1	1	0	-1	0	0	0		0
11	1	0	0	0	0	0	0	0	0	0		1
12	0	0	1	0	0	0	0	0	0	0		1
13	1	0	0	0	-1	0	0	0	0	0		0
14	0	0	0	0	0	0	0	0	0	0		0
15	0	0	0	0	0	0	0	0	0	0		0
16	1	-1	0	0	-1	1	0	0	0	0		0
17	1	0	0	0	0	0	1	-1	0	0		1
18	1	0	0	1	0	0	0	0	0	0		2
19	0	0	0	0	0	0	0	0	0	0		0
20	1	0	0	0	0	1	-1	0	0	0		1
21	0	0	0	0	0	0	0	0	0	0		0
22	1	0	0	0	0	0	0	0	0	0		1
ALL VA	9	-1	1	0	-2	5	-4	-1	0	0		7

† In FY 2001 the PSU was renamed as a PTSD Domiciliary.

Table 3. VA SPECIALIZED PTSD PROGRAMS: FY 2001: PROGRAM COUNTS BY VAMC.

VISN	FACILITY	STATION NUMBER	PTSD					PTSD			SUM		
			PCT	SUPT	WSDTT	DH	EBTPU	PRRP	DOM	SIPU	WTRP	OTHER*	VAMC
1	Boston HCS	523	2	1	1								4
1	Connecticut HCS	689	1	1				1					3
1	Manchester	608	1										1
1	Northampton	631								1			1
1	Providence	650	1										1
1	Togus	402				1							1
1	White River Junction	405	1			1							2
2	Canandaigua	528A5	1										1
2	Western New York HCS	528A4	1					1					2
3	Bronx	526	1										1
3	Hudson Valley HCS	620	1						1				2
3	New Jersey HCS	561	1					1					2
3	New York Harbor HCS	630/630A4	2										2
4	Clarksburg	540						1					1
4	Coatesville	542	1					1					2
4	Philadelphia	642	1										1
4	Pittsburgh HCS	646A5	1	1									2
5	Martinsburg	613							1				1
5	Maryland HCS	512	2					1					3
5	Washington	688	1										1
6	Asheville	637	1										1
6	Durham	558	1										1
6	Fayetteville (NC)	565	1										1
6	Hampton	590	1										1
6	Salem	658								1			1
6	Salisbury	659	1							1			2
7	Atlanta	508	1										1
7	Augusta	509	1										1
7	Birmingham	521	1										1
7	Central Alabama Veterans HCS	619A4	1										1
7	Charleston	534	1										1
7	Dublin	557	1										1
7	Tuscaloosa	679	1			1							2
8	Bay Pines	516		1					1				2
8	Miami	546	1					1					2
8	No. Florida/So. Georgia Veterans HCS	573	1										1
8	San Juan	672	1										1
8	Tampa	673	1										1
9	Lexington	596	1										1
9	Louisville	603	1										1
9	Memphis	614	1										1
9	Mountain Home	621	1										1
10	Brecksville	541	1		1	1						1	4

Table 3. VA SPECIALIZED PTSD PROGRAMS: FY 2001: PROGRAM COUNTS BY VAMC.

VISN	FACILITY	STATION NUMBER	PCT	SUPT	WSDTT	PTSD			PTSD			WTRP	OTHER*	SUM VAMC
						DH	EBTPU	PRRP	DOM	SIPU				
10	Chillicothe	538	1											1
10	Cincinnati	539	1			1								2
10	Columbus	757	1											1
10	Dayton	552	1			1								2
11	Ann Arbor HCS	506	1											1
11	Battle Creek	515	1							1				2
11	Danville	550	1											1
11	Northern Indiana HCS	610A4	2											2
12	Chicago HCS	537	1											1
12	Hines	578	1											1
12	Madison	607			1									1
12	Milwaukee	695							1					1
12	North Chicago	556						1						1
12	Tomah	676						1						1
13	Black Hills HCS	568	1	1										2
13	Minneapolis	618	1											1
13	Sioux Falls	438	1											1
14	Central Iowa HCS	636A6/A7	1					1						2
14	Iowa City	636A8	1											1
14	Nebraska-Western Iowa HCS	636/636A5	2											2
15	Eastern Kansas HCS	589A5	1							1				2
15	Kansas City	589	1											1
15	Poplar Bluff	657A4	1											1
15	St. Louis	657	1											1
15	Wichita	589A7	1											1
16	Central Arkansas Veterans HCS	598	1						1					2
16	Fayetteville (AR)	564	1											1
16	Gulf Coast Veterans HCS	520	1											1
16	Houston	580	1											1
16	Jackson	586	1					1	1					3
16	New Orleans	629	1		1			1						3
16	Oklahoma City	635	1											1
17	Central Texas Veterans HCS	674	3					1						4
17	North Texas HCS	549	1											1
17	South Texas Veterans HCS	671	1											1
18	El Paso Veterans HCS	756	1											1
18	New Mexico HCS	501	1											1
18	Phoenix	644	1											1
18	Southern Arizona HCS	678	1				1							2

Table 3. VA SPECIALIZED PTSD PROGRAMS: FY 2001: PROGRAM COUNTS BY VAMC.

VISN	FACILITY	STATION NUMBER	PCT	SUPT	WSDTT	PTSD			PTSD			OTHER*	SUM VAMC
19	Cheyenne	442	1										1
19	Denver	554				1							1
19	Grand Junction	575	1										1
19	Southern Colorado HCS	554GD	1										1
19	Salt Lake City HCS	660	1										1
20	Boise	531	1				1						2
20	Portland	648	1										1
20	Puget Sound HCS	663	1				1		1				3
20	Roseburg HCS	653								1			1
20	Spokane	668	1										1
21	Hilo	459GB						1					1
21	Honolulu	459	1										1
21	Northern California HCS	612	1										1
21	Palo Alto HCS	640	1					1			1		3
21	San Francisco	662	1	1									2
22	Greater Los Angeles HCS	691	2										2
22	Loma Linda	605	1		1								2
22	San Diego HCS	664	1										1
22	Southern NV HCS	593	1										1

* OTHER = Refers to a Specialized Intensive PTSD Program with a substance abuse unit.

Table 4. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, By VAMC, FY 2001.

VISN	Specialized Program FY 2001 Expenditures*			% Inpatient/ Intensive	Total Veteran		Expenditures Per SC/Low Income Veteran**		
	Outpatient	Inpatient/Intensive	Total		Population	SC/Low Inc	Outpatient	Intensive	Total
1	\$3,020,448	\$1,203,520	\$4,223,968	28.5%	1,500,892	358,094	\$8.43	\$3.36	\$11.80
2	\$688,510	\$629,281	\$1,317,791	47.8%	697,421	194,415	\$3.54	\$3.24	\$6.78
3	\$1,891,152	\$1,883,316	\$3,774,468	49.9%	1,595,593	335,211	\$5.64	\$5.62	\$11.26
4	\$2,200,090	\$1,775,340	\$3,975,430	44.7%	1,819,870	497,402	\$4.42	\$3.57	\$7.99
5	\$1,193,652	\$606,174	\$1,799,826	33.7%	857,564	168,218	\$7.10	\$3.60	\$10.70
6	\$1,241,558	\$1,953,182	\$3,194,740	61.1%	1,251,189	360,885	\$3.44	\$5.41	\$8.85
7	\$2,990,220	\$561,634	\$3,551,853	15.8%	1,367,528	399,439	\$7.49	\$1.41	\$8.89
8	\$2,212,173	\$1,029,631	\$3,241,805	31.8%	1,634,357	482,839	\$4.58	\$2.13	\$6.71
9	\$1,053,806	\$0	\$1,053,806	0.0%	1,060,416	367,654	\$2.87	\$0.00	\$2.87
10	\$2,864,186	\$1,381,215	\$4,245,401	32.5%	1,151,473	318,983	\$8.98	\$4.33	\$13.31
11	\$1,059,720	\$1,034,308	\$2,094,028	49.4%	1,651,186	427,356	\$2.48	\$2.42	\$4.90
12	\$1,010,250	\$1,632,185	\$2,642,435	61.8%	1,362,314	319,235	\$3.16	\$5.11	\$8.28
13	\$1,572,666	\$93,690	\$1,666,356	5.6%	707,005	210,110	\$7.48	\$0.45	\$7.93
14	\$1,191,930	\$164,020	\$1,355,951	12.1%	516,075	153,798	\$7.75	\$1.07	\$8.82
15	\$1,921,581	\$1,327,510	\$3,249,091	40.9%	1,071,604	329,293	\$5.84	\$4.03	\$9.87
16	\$4,204,950	\$1,334,343	\$5,539,293	24.1%	1,887,301	651,983	\$6.45	\$2.05	\$8.50
17	\$1,728,396	\$1,059,847	\$2,788,243	38.0%	1,026,699	321,378	\$5.38	\$3.30	\$8.68
18	\$1,866,624	\$0	\$1,866,624	0.0%	842,132	276,151	\$6.76	\$0.00	\$6.76
19	\$1,161,544	\$541,092	\$1,702,635	31.8%	731,842	215,445	\$5.39	\$2.51	\$7.90
20	\$3,665,039	\$2,158,229	\$5,823,268	37.1%	1,191,422	342,926	\$10.69	\$6.29	\$16.98
21	\$2,026,783	\$3,081,656	\$5,108,439	60.3%	1,418,772	338,504	\$5.99	\$9.10	\$15.09
22	\$2,159,094	\$0	\$2,159,094	0.0%	1,841,007	418,847	\$5.15	\$0.00	\$5.15
ALL VA	\$42,924,371	\$23,450,173	#####	35.3%	27,183,662	7,488,166	\$5.73	\$3.13	\$8.86
AVERAGE	\$1,951,108	\$1,065,917	\$3,017,025	32.1%	1,235,621	340,371	\$5.86	\$3.14	\$9.00
SD	899,847	794,750	1,367,298	19.3%	397,725	113,743	\$2.08	\$2.24	\$3.20
CV	0.46	0.75	0.45	0.60	0.32	0.33	0.35	0.72	0.36

Note: No specialized Intensive PTSD Program was opened in VISNs 9, 18, or 22 for this time period.

* Total Expenditures = "All Other dollars plus total salary dollars for both centrally-funded and station-funded FTEE that were spent for the program as reported in the FY 2001 Annual Report.

* * Bolded (underlined) values are 1 s.d. above the mean of all VISNs, outlined values are 1 s.d. below the mean.

Table 5. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, By VAMC, FY 2001.

VISN	FACILITY/STATE	PCT	SUPT	WSDTT	PTSD DH	EBTPU	PRRP	PTSD DOM	SIPU	WTRP	OTHER*	SUM VAMC
1	Boston (MA) HCS: Boston	\$355,121		\$311,107								\$666,228
1	Boston (MA) HCS: Brockton	\$283,687	\$165,164									\$448,851
1	Connecticut HCS: West Haven	\$555,139	\$434,749				\$312,598					\$1,302,487
1	Manchester, NH	\$169,842										\$169,842
1	Northampton, MA								\$502,738			\$502,738
1	Providence, RI	\$471,346										\$471,346
1	Togus, ME				\$219,414							\$219,414
1	White River Junction, VT	\$274,294			\$168,770							\$443,063
2	Canandaigua, NY	\$421,273										\$421,273
2	Western NY HCS: Batavia	\$267,236					\$629,281					\$896,517
3	Bronx, NY	\$666,536										\$666,536
3	Hudson Valley (NY) HCS: Montrose							\$959,216				\$959,216
3	New Jersey HCS: East Orange	\$197,029										\$197,029
3	New Jersey HCS: Lyons							\$924,099				\$924,099
3	New York Harbor HCS: Brooklyn	\$427,636										\$427,636
3	New York Harbor HCS: New York	\$599,951										\$599,951
4	Clarksburg, WV						\$534,698					\$534,698
4	Coatesville, PA	\$616,785					\$1,240,642					\$1,857,427
4	Philadelphia, PA	\$885,363										\$885,363
4	Pittsburgh (PA) HCS: Highland Drive	\$450,671	\$247,270									\$697,942
5	Martinsburg, WV							\$380,128				\$380,128
5	Maryland HCS: Baltimore	\$264,718				\$226,046						\$490,764
5	Maryland HCS: Perry Point	\$394,698										\$394,698
5	Washington, DC	\$534,236										\$534,236
6	Asheville, NC	\$125,888										\$125,888
6	Durham, NC	\$371,972										\$371,972
6	Fayetteville, NC	\$28,198										\$28,198
6	Hampton, VA	\$375,927										\$375,927
6	Salem, VA								\$990,777			\$990,777
6	Salisbury, NC	\$339,572							\$962,405			\$1,301,977
7	Atlanta, GA	\$279,791										\$279,791
7	Augusta, GA	\$975,270										\$975,270
7	Birmingham, AL	\$386,595										\$386,595
7	Central AL Veterans HCS: Tuskegee	\$312,044										\$312,044
7	Charleston, SC	\$380,316										\$380,316
7	Dublin, GA	\$387,502										\$387,502
7	Tuscaloosa, AL	\$268,701			\$561,634							\$830,335

Table 5. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, By VAMC, FY 2001.

[illegible]

Table 5. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, By VAMC, FY 2001.

VISN	FACILITY/STATE	PCT	SUPT	WSDTT	PTSD DH	EBTPU	PRRP	PTSD DOM	SIPU	WTRP	OTHER*	SUM VAMC
16	Central AR Veterans HCS (Little Rock)							\$672,549				\$672,549
16	Fayetteville, AR	\$454,030										\$454,030
16	Gulf Coast (MS) Veterans HCS (Biloxi)	\$383,759										\$383,759
16	Houston, TX	\$1,483,175										\$1,483,175
16	Jackson, MS	\$406,954				\$85,562	\$185,157					\$677,672
16	New Orleans, LA	\$851,693		\$188,099			\$391,076					\$1,430,868
16	Oklahoma City, OK	\$437,240										\$437,240
17	Central TX Veterans HCS: Temple	\$372,987										\$372,987
17	Central TX Veterans HCS: Waco	\$231,480					\$250,629		\$809,218			\$1,291,327
17	North TX HCS: Dallas	\$556,902										\$556,902
17	South TX Veterans HCS: San Antonio	\$567,026										\$567,026
18	El Paso (TX) VETERANS HCS	\$390,690										\$390,690
18	New Mexico HCS (Albuquerque)	\$694,011										\$694,011
18	Phoenix, AZ	\$437,454										\$437,454
18	Southern AZ HCS (Tucson)	\$344,469										\$344,469
19	Cheyenne, WY	\$167,250										\$167,250
19	Denver, CO				\$541,092							\$541,092
19	Grand Junction, CO	\$191,373										\$191,373
19	Salt Lake City (UT) HCS	\$802,921										\$802,921
20	Boise, ID	\$729,395				\$392,269						\$1,121,664
20	Portland, OR	\$780,595										\$780,595
20	Puget Sound (WA) HCS: American Lake							\$524,138				\$524,138
20	Puget Sound (WA) HCS: Seattle	\$1,949,148				\$932,898						\$2,882,046
20	Roseburg (OR) HCS								\$308,925			\$308,925
20	Spokane, WA	\$205,901										\$205,901
21	Hilo, HI						\$928,909					\$928,909
21	Honolulu, HI	\$358,612										\$358,612
21	Northern CA HCS: (Sacramento)	\$233,180										\$233,180
21	Palo Alto (CA) HCS: San Jose	\$228,740										\$228,740
21	Palo Alto HCS: Menlo Park						\$1,733,788			\$418,959		\$2,152,747
21	San Francisco, CA	\$951,845	\$254,407									\$1,206,252
22	Greater Los Angeles (CA) HCS: East LA	\$384,398										\$384,398
22	Greater Los Angeles (CA) HCS: West LA	\$844,039										\$844,039
22	Loma Linda, CA	\$143,074		\$251,299								\$394,373
22	San Diego (CA) HCS CA	\$536,283										\$536,283

*OTHER = Refers to a Specialized Intensive PTSD Program with a substance abuse unit.

Data for TABLE 6 are not available for this fiscal year.
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Table 7. INTENSITY DATA: SOPPs by VISN: FY 2001.

SOPPs WORKLOAD				<i>Total Vet</i>	<i>Eligible for</i>	<i>All VA MH</i>	Population-Based Workload*	
VISN	Veterans	Visits	Vis/Vet*	<i>Population</i>	<i>VA Services</i>	<i>Service Users</i>	Per 1,000 Elig.	Pct. MH Users
1	4125	44885	10.88	1,500,892	358,094	37,778	11.52	10.9%
2	1003	10532	10.50	697,421	194,415	18,568	5.16	5.4%
3	2613	36252	13.87	1,595,593	335,211	30,449	7.80	8.6%
4	2469	20621	8.35	1,819,870	497,402	36,509	4.96	6.8%
5	1819	19273	10.60	857,564	168,218	17,650	10.81	10.3%
6	2458	16939	6.89	1,251,189	360,885	32,233	6.81	7.6%
7	3130	29964	9.57	1,367,528	399,439	39,623	7.84	7.9%
8	2955	20475	6.93	1,634,357	482,839	64,151	6.12	4.6%
9	1952	13949	7.15	1,060,416	367,654	32,462	5.31	6.0%
10	2961	27795	9.39	1,151,473	318,983	32,419	9.28	9.1%
11	1776	14833	8.35	1,651,186	427,356	28,880	4.16	6.1%
12	904	11597	12.83	1,362,314	319,235	27,011	2.83	3.3%
13	1409	15186	10.78	707,005	210,110	18,620	6.71	7.6%
14	1206	10620	8.81	516,075	153,798	10,999	7.84	11.0%
15	2617	28898	11.04	1,071,604	329,293	28,286	7.95	9.3%
16	6259	63978	10.22	1,887,301	651,983	61,826	9.60	10.1%
17	2516	26122	10.38	1,026,699	321,378	27,890	7.83	9.0%
18	3451	30282	8.77	842,132	276,151	29,464	12.50	11.7%
19	1897	14247	7.51	731,842	215,445	20,176	8.81	9.4%
20	4869	48925	10.05	1,191,422	342,926	35,925	14.20	13.6%
21	2880	29561	10.26	1,418,772	338,504	31,548	8.51	9.1%
22	2747	28216	10.27	1,841,007	418,847	41,873	6.56	6.6%
ALL VA	57,783	563,150	9.75	27,183,662	7,488,166	704,340	7.72	8.2%
AVERAGE	2637	25598	9.70	1,235,621	340,371	32,015	7.87	8.4%
SD	1229	13288	1.74	397,725	113,743	12,375	2.68	2.4%
CV	0.47	0.52	0.18	0.32	0.33	0.39	0.34	0.29

* Outlined values are 1 s.d. below the mean of all VISNs and reflect low intensity and low population coverage in outpatient specialized PTSD service delivery.

Table 7a. INTENSITY DATA: SOPPs by VISN: FY 2000, FY 2001 and FY 2001-2000 change.

VISN	FY 2000			FY 2001			% Change: FY 2001 - FY 2000		
	SOPP WORKLOAD			SOPP WORKLOAD			SOPP WORKLOAD		
	Veterans	Visits	Vis/Vet*	Veterans	Visits	Vis/Vet*	Veterans	Visits	Visits/Vet
1	3,739	43,153	11.5	4,125	44,885	10.9	10.3%	4.0%	-5.7%
2	1,047	14,060	13.4	1,003	10,532	10.5	-4.2%	-25.1%	-21.8%
3	2,576	36,805	14.3	2,613	36,252	13.9	1.4%	-1.5%	-2.9%
4	1,929	16,769	8.7	2,469	20,621	8.4	28.0%	23.0%	-3.9%
5	1,657	19,341	11.7	1,819	19,273	10.6	9.8%	-0.4%	-9.2%
6	2,278	14,632	6.4	2,458	16,939	6.9	7.9%	15.8%	7.3%
7	2,972	24,128	8.1	3,130	29,964	9.6	5.3%	24.2%	17.9%
8	2,737	23,885	8.7	2,955	20,475	6.9	8.0%	-14.3%	-20.6%
9	1,756	13,778	7.8	1,952	13,949	7.1	11.2%	1.2%	-8.9%
10	2,296	21,880	9.5	2,961	27,795	9.4	29.0%	27.0%	-1.5%
11	1,664	15,302	9.2	1,776	14,833	8.4	6.7%	-3.1%	-9.2%
12	826	11,145	13.5	904	11,597	12.8	9.4%	4.1%	-4.9%
13	1,291	14,922	11.6	1,409	15,186	10.8	9.1%	1.8%	-6.8%
14	1,193	9,403	7.9	1,206	10,620	8.8	1.1%	12.9%	11.7%
15	2,400	30,316	12.6	2,617	28,898	11.0	9.0%	-4.7%	-12.6%
16	6,088	60,096	9.9	6,259	63,978	10.2	2.8%	6.5%	3.6%
17	2,641	27,658	10.5	2,516	26,122	10.4	-4.7%	-5.6%	-0.9%
18	3,034	32,013	10.6	3,451	30,282	8.8	13.7%	-5.4%	-16.8%
19	1,481	12,667	8.6	1,897	14,247	7.5	28.1%	12.5%	-12.2%
20	4,307	44,009	10.2	4,869	48,925	10.0	13.0%	11.2%	-1.7%
21	2,997	29,039	9.7	2,880	29,561	10.3	-3.9%	1.8%	5.9%
22	2,573	24,975	9.7	2,747	28,216	10.3	6.8%	13.0%	5.8%
ALL VA	53,192	539,976	10.2	57,783	563,150	9.7	8.6%	4.3%	-4.0%
AVERAGE	2,431	24,544	10.2	2,637	25,598	9.7	9.0%	4.5%	-4.0%
SD	1,166	12,442	2.0	1,229	13,288	1.7	9.3%	12.2%	9.8%
CV	0.48	0.51	0.20	0.47	0.52	0.18	1.03	2.71	-2.47

Table 8. INTENSITY DATA: SOPPs by INDIVIDUAL PROGRAM, FY 2001.

VISN		PROGRAM	FY 2001		
			# VISITS	# VETS TREATED	VISITS/ VETERANS *
1	Boston (MA) HCS: Boston	PCT	5241	508	10
1	Boston (MA) HCS: Boston	WSDTT	3799	179	21
1	Boston HCS: Brockton	PCT	5656	470	12
1	Boston HCS: Brockton	SUPT	1596	143	11
1	Connecticut HCS: West Haven	PCT	10514	571	18
1	Connecticut HCS: West Haven	SUPT	4571	253	18
1	Manchester, NH	PCT	3233	196	16
1	Providence, RI	PCT	10655	774	14
1	White River Junction, VT	PCT	2633	318	8
2	Canandaigua, NY	PCT	6276	479	13
2	Western NY HCS: Batavia	PCT	4504	300	15
3	Bronx, NY	PCT	11536	404	29
3	New Jersey HCS: East Orange	PCT	3763	294	13
3	New York Harbor HCS: Brooklyn	PCT	10521	754	14
3	New York Harbor HCS: New York	PCT	12914	650	20
4	Coatesville, PA	PCT	4893	296	17
4	Philadelphia, PA	PCT	5996	729	8
4	Pittsburgh (PA) HCS: Highland Drive	PCT	6685	603	11
4	Pittsburgh (PA) HCS: Highland Drive	SUPT	4330	241	18
5	Maryland HCS: Baltimore	PCT	4453	376	12
5	Maryland HCS: Perry Point	PCT	4676	430	11
5	Washington, DC	PCT	11950	571	21
6	Asheville, NC	PCT	801	81	10
6	Durham, NC	PCT	3708	641	6
6	Fayetteville, NC	PCT	441	78	6
6	Hampton, VA	PCT	8007	731	11
6	Salisbury, NC	PCT	4255	349	12
7	Atlanta, GA	PCT	8884	327	27
7	Augusta, GA	PCT	NR	NR	NC
7	Birmingham, AL	PCT	3580	473	8
7	Central AL Veterans HCS: Tuskegee	PCT	4472	310	14
7	Charleston, SC	PCT	4122	362	11
7	Dublin, GA	PCT	10652	321	33
7	Tuscaloosa, AL	PCT	6875	451	15
8	Bay Pines, FL	SUPT	4451	914	5
8	Miami, FL	PCT	5160	325	16
8	No.FL/So.GA Veterans HCS: Gainesville	PCT	3339	335	10
8	San Juan, PR	PCT	3623	397	9
8	Tampa, FL	PCT	4596	363	13
9	Lexington, KY	PCT	6206	218	28
9	Louisville, KY	PCT	1063	219	5
9	Memphis, TN	PCT	3780	364	10
9	Mountain Home, TN	PCT	5645	713	8

Table 8. INTENSITY DATA: SOPPs by INDIVIDUAL PROGRAM, FY 2001.

VISN		PROGRAM	FY 2001		
			# VISITS	# VETS TREATED	VISITS/ VETERANS *
10	Brecksville, OH	PCT	16557	582	28
10	Brecksville, OH	WSDTT	1882	104	18
10	Chillicothe, OH	PCT	3851	540	7
10	Cincinnati, OH	PCT	5973	449	13
10	Columbus, OH	PCT	2667	294	9
10	Dayton, OH	PCT	2373	217	11
11	Ann Arbor (MI) HCS	PCT	3446	201	17
11	Battle Creek, MI	PCT	7918	572	14
11	Danville, IL	PCT	2885	312	9
11	Northern IN HCS: Marion	PCT	3193	298	11
12	Chicago (IL) HCS: West Side	PCT	9204	444	21
12	Hines, IL	PCT	2726	288	9
12	Madison, WI	WSDTT	99	16	6
13	Black Hills (SD) HCS: Fort Meade	SUPT	4705	313	15
13	Minneapolis, MN	PCT	11016	764	14
13	Sioux Falls, SD	PCT	1165	134	9
14	Central IA HCS: Knoxville	PCT	1783	104	17
14	Iowa City, IA	PCT	3665	431	9
14	NE-Western IA HCS: Lincoln	PCT	1705	136	13
14	NE-Western IA HCS: Omaha	PCT	3980	272	15
15	Eastern KS HCS: Topeka	PCT	9889	523	19
15	Kansas City, MO	PCT	5367	491	11
15	Poplar Bluff, MO*	PCT	1784	241	7
15	St. Louis, MO	PCT	9148	574	16
15	Wichita, KS	PCT	5117	292	18
16	Fayetteville, AR	PCT	4273	602	7
16	Gulf Coast (MS) Veterans HCS (Biloxi)	PCT	5957	477	12
16	Houston, TX	PCT	20308	1330	15
16	Jackson, MS	PCT	6099	793	8
16	New Orleans, LA	PCT	21995	1310	17
16	New Orleans, LA	WSDTT	768	70	11
16	Oklahoma City, OK	PCT	17831	484	37
17	Central TX Veterans HCS: Temple	PCT	4458	304	15
17	Central TX Veterans HCS: Waco	PCT	5401	264	20
17	North TX HCS: Dallas	PCT	8343	638	13
17	South TX Veterans HCS: San Antonio	PCT	7593	778	10
18	El Paso (TX) Veterans HCS	PCT	7139	571	13
18	New Mexico HCS (Albuquerque)	PCT	11562	1091	11
18	Phoenix, AZ	PCT	7825	494	16
18	Southern AZ HCS (Tucson)	PCT	5098	505	10
19	Cheyenne, WY	PCT	1177	158	7
19	Grand Junction, CO	PCT	2825	350	8
19	Salt Lake City (UT) HCS	PCT	10842	876	12
20	Boise, ID	PCT	4571	394	12
20	Portland, OR	PCT	8591	796	11
20	Puget Sound (WA) HCS: Seattle	PCT	35460	2487	14
20	Spokane, WA	PCT	3414	275	12

Table 8. INTENSITY DATA: SOPPs by INDIVIDUAL PROGRAM, FY 2001.

VISN		PROGRAM	FY 2001		
			# VISITS	# VETS TREATED	VISITS/ VETERANS *
21	Honolulu, HI	PCT	5208	320	16
21	Northern CA HCS: (Sacramento)	PCT	1181	148	8
21	Palo Alto (CA) HCS: San Jose	PCT	7020	515	14
21	San Francisco, CA	PCT	13260	1060	13
21	San Francisco, CA	SUPT	3300	94	35
22	Greater Los Angeles (CA) HCS †	PCT	12937	1044	12
22	Loma Linda, CA	PCT	3068	174	18
22	Loma Linda, CA	WSDTT	2232	200	11
22	San Diego (CA) HCS CA	PCT	11655	850	14
SUM			617544	45555	14
AVG			6238	460	14
SD			5166	339	6
CV			0.83	0.74	0.46

† Data are not comparable to previous reports due to consolidation.

NR = Data were Not Reported. NC = Data were Not Calculated because data were not reported.

*Outlined values are 1 s.d. below the mean.

Table 9. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD, by VISN: FY 2001 Annual VA Census.*

VISN	<u>Inpatient PTSD Treatment</u>				<u>Domiciliary and PRRP Treatment</u>				<i>Total</i>			
	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	Dom. and PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	<i>Occupied PTSD Beds</i>	<i>Total Vet Population</i>	<i>Eligible for VA Services</i>	<i>PTSD Beds Per 10,000 Elig.</i>
1	265	33	12.5%	17.7	231	9	3.9%	48.2	42	1,500,892	358,094	1.17
2	92	4	4.3%	8.8	303	11	3.6%	20.9	15	697,421	194,415	0.77
3	233	9	3.9%	10.0	355	39	11.0%	60.7	48	1,595,593	335,211	1.43
4	190	4	2.1%	10.8	407	43	10.6%	46.8	47	1,819,870	497,402	0.94
5	168	4	2.4%	12.5	358	46	12.8%	116.7	50	857,564	168,218	2.97
6	307	47	15.3%	9.3	209	0	0.0%	NA	47	1,251,189	360,885	1.30
7	241	19	7.9%	26.7	132	20	15.2%	13.4	39	1,367,528	399,439	0.98
8	108	6	5.6%	7.0	212	36	17.0%	52.7	42	1,634,357	482,839	0.87
9	208	7	3.4%	5.3	321	4	1.2%	141.5	11	1,060,416	367,654	0.30
10	150	6	4.0%	15.3	314	16	5.1%	28.5	22	1,151,473	318,983	0.69
11	254	5	2.0%	12.4	129	28	21.7%	21.0	33	1,651,186	427,356	0.77
12	218	8	3.7%	11.0	600	42	7.0%	49.9	50	1,362,314	319,235	1.57
13	45	0	0.0%	NA	258	12	4.7%	40.8	12	707,005	210,110	0.57
14	38	1	2.6%	20.0	76	8	10.5%	43.8	9	516,075	153,798	0.59
15	191	37	19.4%	29.9	237	12	5.1%	55.4	49	1,071,604	329,293	1.49
16	279	15	5.4%	36.3	235	43	18.3%	28.2	58	1,887,301	651,983	0.89
17	241	12	5.0%	36.2	679	32	4.7%	70.0	44	1,026,699	321,378	1.37
18	66	0	0.0%	NA	132	1	0.8%	115.0	1	842,132	276,151	0.04
19	116	17	14.7%	13.9	23	4	17.4%	29.8	21	731,842	215,445	0.97
20	126	30	23.8%	16.1	703	46	6.5%	124.5	76	1,191,422	342,926	2.22
21	109	5	4.6%	12.0	150	36	24.0%	43.0	41	1,418,772	338,504	1.21
22	172	7	4.1%	42.6	240	9	3.8%	124.6	16	1,841,007	418,847	0.38
ALL VA	3,817	276	7.2%	19.01	6304	497	7.9%	60.1	773	27,183,662	7,488,166	1.03
AVERAGE	174	13	6.7%	16.1	287	23	9.3%	58.0	35	1,235,621	340,371	1.07
SD	76	13	6.2%	11.3	176	16	6.9%	39.5	19	397,725	113,743	0.63
CV	0.44	1.01	0.94	0.70	0.61	0.71	0.74	0.68	0.53	0.32	0.33	0.59

* Bolded (underlined) values are 1 s.d. above the mean of all VISNs, outlined values are 1 s.d. below the mean.

Table 9a. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD, by VISN: FY 2000, FY 2001, and FY 2001-2000 change.

VISN	FY 2000								FY 2001								% Change: FY 2001 - FY 2000							
	<u>Inpatient PTSD Treatment</u>				<u>Domiciliary and PRRP Treatment</u>				<u>Inpatient PTSD Treatment</u>				<u>Domiciliary and PRRP Treatment</u>				<u>Inpatient PTSD Treatment</u>				<u>Domiciliary and PRRP Treatment</u>			
	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS
1	247	26	10.5%	9.8	272	21	7.7%	54.4	265	33	12.5%	17.7	231	9	3.9%	48.2	7.3%	26.9%	18.3%	79.4%	-15.1%	-57.1%	-49.5%	-11.4%
2	104	1	1.0%	5.0	288	12	4.2%	22.3	92	4	4.3%	8.8	303	11	3.6%	20.9	-11.5%	300.0%	352.2%	75.0%	5.2%	-8.3%	-12.9%	-6.4%
3	392	8	2.0%	18.3	300	47	15.7%	35.2	233	9	3.9%	10.0	355	39	11.0%	60.7	-40.6%	12.5%	89.3%	-45.2%	18.3%	-17.0%	-29.9%	72.5%
4	207	10	4.8%	9.6	414	44	10.6%	27.2	190	4	2.1%	10.8	407	43	10.6%	46.8	-8.2%	-60.0%	-56.4%	12.0%	-1.7%	-2.3%	-0.6%	72.1%
5	198	7	3.5%	4.0	347	45	13.0%	108.1	168	4	2.4%	12.5	358	46	12.8%	116.7	-15.2%	-42.9%	-32.7%	212.5%	3.2%	2.2%	-0.9%	8.0%
6	284	48	16.9%	12.5	215	3	1.4%	42.3	307	47	15.3%	9.3	209	0	0.0%	NA	8.1%	-2.1%	-9.4%	-25.7%	-2.8%	-100.0%	-100.0%	-100.0%
7	244	18	7.4%	23.4	172	15	8.7%	54.1	241	19	7.9%	26.7	132	20	15.2%	13.4	-1.2%	5.6%	6.9%	14.1%	-23.3%	33.3%	73.7%	-75.2%
8	110	6	5.5%	5.3	214	23	10.7%	105.6	108	6	5.6%	7.0	212	36	17.0%	52.7	-1.8%	0.0%	1.9%	31.3%	-0.9%	56.5%	58.0%	-50.1%
9	207	3	1.4%	3.3	341	3	0.9%	266.0	208	7	3.4%	5.3	321	4	1.2%	141.5	0.5%	133.3%	132.2%	58.6%	-5.9%	33.3%	41.6%	-46.8%
10	142	5	3.5%	4.8	368	29	7.9%	33.7	150	6	4.0%	15.3	314	16	5.1%	28.5	5.6%	20.0%	13.6%	219.4%	-14.7%	-44.8%	-35.3%	-15.4%
11	307	3	1.0%	25.3	91	25	27.5%	10.1	254	5	2.0%	12.4	129	28	21.7%	21.0	-17.3%	66.7%	101.4%	-51.1%	41.8%	12.0%	-21.0%	108.7%
12	259	6	2.3%	10.2	621	43	6.9%	40.5	218	8	3.7%	11.0	600	42	7.0%	49.9	-15.8%	33.3%	58.4%	8.2%	-3.4%	-2.3%	1.1%	23.0%
13	42	2	4.8%	5.5	254	12	4.7%	25.6	45	0	0.0%	NA	258	12	4.7%	40.8	7.1%	-100.0%	-100.0%	-100.0%	1.6%	0.0%	-1.6%	59.3%
14	55	0	0.0%	NA	83	7	8.4%	33.1	38	1	2.6%	20.0	76	8	10.5%	43.8	-30.9%				-8.4%	14.3%	24.8%	32.0%
15	189	37	19.6%	34.2	256	4	1.6%	91.8	191	37	19.4%	29.9	237	12	5.1%	55.4	1.1%	0.0%	-1.0%	-12.6%	-7.4%	200.0%	224.1%	-39.6%
16	267	6	2.2%	25.7	278	32	11.5%	27.0	279	15	5.4%	36.3	235	43	18.3%	28.2	4.5%	150.0%	139.2%	41.3%	-15.5%	34.4%	59.0%	4.3%
17	296	28	9.5%	27.2	630	9	1.4%	134.0	241	12	5.0%	36.2	679	32	4.7%	70.0	-18.6%	-57.1%	-47.4%	33.1%	7.8%	255.6%	229.9%	-47.8%
18	66	2	3.0%	1.0	132	1	0.8%	2.0	66	0	0.0%	NA	132	1	0.8%	115.0	0.0%	-100.0%	-100.0%	-100.0%	0.0%			
19	101	5	5.0%	9.4	14	5	35.7%	20.0	116	17	14.7%	13.9	23	4	17.4%	29.8	14.9%	240.0%	196.0%	47.7%	64.3%	-20.0%	-51.3%	48.8%
20	102	28	27.5%	15.4	953	47	4.9%	109.4	126	30	23.8%	16.1	703	46	6.5%	124.5	23.5%	7.1%	-13.3%	4.6%	-26.2%	-2.1%	32.7%	13.8%
21	131	1	0.8%	4.0	160	36	22.5%	47.5	109	5	4.6%	12.0	150	36	24.0%	43.0	-16.8%	400.0%	500.9%	200.0%	-6.3%	0.0%	6.7%	-9.5%
22	156	5	3.2%	16.4	307	37	12.1%	142.4	172	7	4.1%	42.6	240	9	3.8%	124.6	10.3%	40.0%	27.0%	159.6%	-21.8%	-75.7%	-68.9%	-12.6%
ALL VA	4,106	255	6.2%	17.7	6,710	500	7.5%	62.9	3,817	276	7.2%	19.01	6,304	497	7.9%	60.1	-7.0%	8.2%	16.4%	7.4%	-6.1%	-0.6%	5.8%	-4.5%
AVERAGE	187	12	6.2%	12.3	305	23	9.9%	65.1	174	13	6.7%	16.1	287	23	9.3%	58.0	-4.3%	51.1%	60.8%	41.0%	-0.5%	14.9%	18.1%	1.3%
SD	91	13	6.8%	9.4	204	16	8.7%	59.2	76	13	6.2%	11.3	176	16	6.9%	39.5	14.9%	125.4%	141.8%	90.2%	20.1%	78.5%	80.0%	51.1%
CV	0.49	1.12	1.10	0.77	0.67	0.71	0.88	0.9	0.44	1.01	0.94	0.70	0.61	0.71	0.74	0.68	-3.46	2.45	2.33	2.20	-39.59	5.29	4.43	38.88

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2001 Census

VISN	VAMC	STATION VAMC	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
			General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
1	BEDFORD	518	63	1	1.59%	17.0	39.00	4.00	10.26%	54.0
1	BOSTON HCS †	523	40	1	2.50%	5.0	169.00	5.00	2.96%	43.6
1	CONNECTICUT HCS †	689	24	2	8.33%	8.0	9.00		0.00%	
1	MANCHESTER	608								
1	NORTHAMPTON	631	101	23	22.77%	22.1	14.00		0.00%	
1	PROVIDENCE	650	14	3	21.43%	9.7				
1	TOGUS	402	13	1	7.69%	2.0				
1	WHITE RIVER JCT	405	10	2	20.00%	2.5				
2	ALBANY	500	6		0.00%					
2	BATH	514								
2	CANANDAIGUA	532	47		0.00%					
2	SYRACUSE	670	15	1	6.67%	13.0				
2	WESTERN NEW YORK HCS †	528	24	3	12.50%	7.3	303.00	11.00	3.63%	20.9
3	BRONX	526	34	5	14.71%	7.6				
3	HUDSON VALLEY HCS †	620	54		0.00%	10.7	132.00	20.00	15.15%	78.4
3	NEW JERSEY HCS †	561	52	3	5.77%		154.00	14.00	9.09%	39.4
3	NEW YORK HARBOR HCS †	630	44	1	2.27%	20.0	39.00		0.00%	
3	NORTHPORT	632	49		0.00%		30.00	5.00	16.67%	49.8
4	ALTOONA	503								
4	BUTLER	529					47.00		0.00%	
4	CLARKSBURG	540	4		0.00%		15.00	8.00	53.33%	32.9
4	COATESVILLE	542	69	1	1.45%	10.0	191.00	33.00	17.28%	40.2
4	ERIE	562								
4	LEBANON	595	9	1	11.11%	2.0	49.00		0.00%	
4	PHILADELPHIA	642	23	2	8.70%	15.5				
4	PITTSBURGH HCS †	646	70		0.00%		96.00	2.00	2.08%	210.0
4	WILKES BARRE	693	15		0.00%		9.00		0.00%	
4	WILMINGTON	460								
5	MARTINSBURG	613	10		0.00%		287.00	46.00	16.03%	116.7
5	MARYLAND HCS †	512	137	4	2.92%	12.5	71.00		0.00%	
5	WASHINGTON	688	21		0.00%					
6	ASHEVILLE	637	10	5	50.00%	7.0	15.00		0.00%	
6	BECKLEY	517								
6	DURHAM	558	20	2	10.00%	15.5				
6	FAYETTEVILLE NC	565	20	2	10.00%	6.0				
6	HAMPTON	590	54	8	14.81%	10.9	149.00		0.00%	
6	RICHMOND	652	8		0.00%					
6	SALEM	658	94	12	12.77%	13.0	17.00		0.00%	
6	SALISBURY	659	101	18	17.82%	6.4	28.00		0.00%	

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2001 Census

VISN	VAMC	STATION VAMC	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
			General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
7	ATLANTA	508	29	4	13.79%	5.8	11.00		0.00%	
7	AUGUSTA	509	64	9	14.06%	9.8	46.00	3.00	6.52%	27.7
7	BIRMINGHAM	521								
7	CENTRAL ALABAMA VETERANS HCS †	619	35	3	8.57%	5.7	35.00		0.00%	
7	CHARLESTON	534	15	2	13.33%	7.0				
7	COLUMBIA SC	544	7		0.00%					
7	DUBLIN	557					40.00	17.00	42.50%	10.9
7	TUSCALOOSA	679	91	1	1.10%	365.0				
8	BAY PINES	516	16	1	6.25%	9.0	129.00	19.00	14.73%	63.6
8	MIAMI	546	20		0.00%		38.00	16.00	42.11%	40.4
8	NO. FLORIDA/SO. GEORGIA VETERANS HCS †	573	13		0.00%		28.00		0.00%	
8	SAN JUAN	672	21	3	14.29%	8.0				
8	TAMPA	673	18		0.00%		17.00	1.00	5.88%	41.0
8	W PALM BEACH	548	20	2	10.00%	4.5				
9	HUNTINGTON	581								
9	LEXINGTON	596	13	2	15.38%	3.5				
9	LOUISVILLE	603	8		0.00%					
9	MEMPHIS	614	12	1	8.33%	2.0	6.00		0.00%	
9	MIDDLE TENNESSEE HCS †	622	154	3	1.95%	5.0				
9	MOUNTAIN HOME	621	21	1	4.76%	13.0	315.00	4.00	1.27%	141.5
10	CHILLICOTHE	538	42	3	7.14%	12.0	42.00		0.00%	
10	CINCINNATI	539	20	2	10.00%	24.0	79.00	8.00	10.13%	24.9
10	CLEVELAND	541	69	1	1.45%	8.0	96.00		0.00%	
10	DAYTON	552	19		0.00%		97.00	8.00	8.25%	32.1
11	ALLEN PARK	553	16		0.00%					
11	ANN ARBOR HCS (Ann Arbor)	506	13		0.00%					
11	BATTLE CREEK	515	99	5	5.05%	12.4	106.00	28.00	26.42%	21.0
11	DANVILLE, IL	550	41		0.00%					
11	INDIANAPOLIS	583					23.00		0.00%	
11	NORTHERN INDIANA HCS †	610	85		0.00%					
11	SAGINAW	655								
12	CHICAGO HCS †	537	61	1	1.64%	NR	13.00		0.00%	
12	HINES	578	14	2	14.29%	3.0	54.00	1.00	1.85%	5.0
12	IRON MOUNTAIN	585					2.00		0.00%	
12	MADISON	607	12	2	16.67%	16.0	10.00		0.00%	
12	MILWAUKEE	695	12	1	8.33%	3.0	300.00	9.00	3.00%	156.1
12	NORTH CHICAGO	556	113	2	1.77%	23.5	190.00	25.00	13.16%	18.3
12	TOMAH	676	6		0.00%		31.00	7.00	22.58%	32.3

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2001 Census

VISN	VAMC	STATION VAMC	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
			General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
13	BLACK HILLS HCS †	568	7		0.00%		131.00	2.00	1.53%	123.0
13	FARGO	437	8		0.00%					
13	MINNEAPOLIS	618	15		0.00%					
13	SIOUX FALLS	438	2		0.00%					
13	ST CLOUD	656	13		0.00%		127.00	10.00	7.87%	24.3
14	CENTRAL IOWA HCS †	555	12		0.00%		1.00		0.00%	
14	IOWA CITY	584	13		0.00%					
14	NEBRASKA-WESTERN IOWA †	636	13	1	7.69%	20.0	75.00	8.00	10.67%	43.8
15	EASTERN KANSAS HCS †	677	123	33	26.83%	32.7				
15	HEARTLAND-EAST HCS†	657	38	4	10.53%	6.3	37.00		0.00%	
15	HEARTLAND-WEST HCS†	589	30		0.00%		200.00	12.00	6.00%	55.4
15	MARION IL	609								
15	POPLAR BLUFF	647								
16	ALEXANDRIA	502	38	1	2.63%	11.0				
16	CENTRAL ARKANSAS VET. HCS (No.Little Rock)	598	56	5	8.93%	10.2	88.00	27.00	30.68%	26.7
16	FAYETTEVILLE AR	564	8	1	12.50%	5.0				
16	GULF COAST HCS (Biloxi)	520	65	2	3.08%	11.5	108.00	1.00	0.93%	181.0
16	HOUSTON	580	40	2	5.00%	201.5				
16	JACKSON	586	23	2	8.70%	22.0	23.00	11.00	47.83%	19.1
16	MUSKOGEE	623								
16	NEW ORLEANS	629	13		0.00%		4.00	4.00	100.00%	25.3
16	OKLAHOMA CITY	635	22	2	9.09%	3.5	12.00		0.00%	
16	SHREVEPORT	667	14		0.00%					
17	CENTRAL TEXAS VETERANS HCS †	674	183	10	5.46%	41.5	408.00	31.00	7.60%	71.9
17	NORTH TEXAS HCS †	549	20		0.00%		271.00	1.00	0.37%	12.0
17	SOUTH TEXAS VETERANS HCS †	671	38	2	5.26%	9.5				
18	AMARILLO	504								
18	NEW MEXICO HCS (Albuquerque)	501	17		0.00%		19.00	1.00	5.26%	115.0
18	NORTHERN ARIZONA HCS (Prescott)	649					100.00		0.00%	
18	PHOENIX	644	26		0.00%					
18	SOUTHERN ARIZONA HCS (Tucson)	678	14		0.00%		13.00		0.00%	
18	WEST TEXAS HCS (Big Spring)	519	9		0.00%					
19	CHEYENNE	442								
19	DENVER	554	50	10	20.00%	16.5				
19	GRAND JUNCTION	575	7	2	28.57%	6.0				
19	MONTANA HCS †	436								
19	SALT LAKE CITY HCS	660	14	2	14.29%	3.0				
19	SHERIDAN	666	45	3	6.67%	17.7	23.00	4.00	17.39%	29.8

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2001 Census

VISN	VAMC	STATION VAMC	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
			General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
20	ALASKA HCS & RO (Anchorage)	463					49.00	8.00	16.33%	84.0
20	BOISE	531	11	5	45.45%	22.4	5.00		0.00%	
20	PORTLAND	648	23	1	4.35%	7.0	37.00		0.00%	
20	PUGET SOUND HCS †	663	58	12	20.69%	14.8	78.00	24.00	30.77%	46.4
20	ROSEBURG HCS (Roseburg)	653	26	11	42.31%	17.0	10.00		0.00%	
20	SPOKANE	668	6		0.00%					
20	WALLA WALLA	687	2	1	50.00%	NR	18.00		0.00%	
20	WHITE CITY	692					506.00	14.00	2.77%	281.5
21	CENTRAL CALIFORNIA HCS (Fresno)	570	4		0.00%					
21	HONOLULU	459	14	2	14.29%	6.0	2.00	2.00	100.00%	63.0
21	NORTHERN CALIFORNIA HCS †	612								
21	PALO ALTO HCS †	640	68	1	1.47%	37.0	135.00	34.00	25.19%	41.8
21	SAN FRANCISCO	662	13		0.00%		13.00		0.00%	
21	SIERRA NEVADA HCS (Reno)	654	10	2	20.00%	5.5				
22	GREATER LOS ANGELES HCS †	691	101	6	5.94%	49.3	240.00	9.00	3.75%	124.6
22	LOMA LINDA	605	8		0.00%					
22	LONG BEACH HCS	600	23		0.00%					
22	SAN DIEGO HCS	664	32		0.00%					
22	SOUTHERN NEVADA HCS (Las Vegas)	593	8	1	12.50%	2.0				
ALL VA			3817	276	7.23%	19.0	6304	497	7.88%	60.1
AVERAGE			34	4	7.53%	19.5	88	12	10.55%	65.1
SD			34	5	10.35%	48.9	104	11	19.59%	59.7
CV			1.00	1.35	1.37	2.51	1.18	0.91	1.86	0.92

NR=Data were not reported because they were missing.

* Outlined values are 1 SD above the mean of all VAMCs and reflect long length of stay.

† Data are not comparable to previous reports due to consolidation.

Table 11. Comparison of all inpatient general psychiatry treatment and treatment for PTSD, by VISN, FY 2001.

VISN	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Tx. of PTSD				PTSD/Gen. Psych Ratio	
	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	All Episodes	Unique Veterans*	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	of Bed Days per ...*†	Episode Vet/Year
1	5,210	15.40	3,437	23.3	13.6%	15.5%	709	14.8	532	19.7	1.0	0.8
2	2,282	14.78	1,547	21.8	5.2%	5.8%	119	9.2	89	12.3	0.6	0.6
3	4,067	30.57	2,661	46.7	5.2%	6.6%	213	16.4	176	19.8	0.5	0.4
4	4,048	17.04	2,891	23.9	8.9%	10.2%	359	16.6	296	20.1	1.0	0.8
5	3,209	17.65	2,051	27.6	5.6%	8.1%	179	11.6	166	12.5	0.7	0.5
6	6,677	14.51	4,354	22.2	15.4%	16.4%	1028	16.0	715	22.9	1.1	1.0
7	4,892	14.96	3,460	21.2	13.2%	14.0%	646	12.3	485	16.3	0.8	0.8
8	6,030	7.03	4,146	10.2	5.9%	6.8%	356	6.0	284	7.6	0.9	0.7
9	4,954	13.09	3,526	18.4	7.1%	7.8%	351	10.4	276	13.2	0.8	0.7
10	3,491	14.48	2,449	20.6	5.6%	6.6%	196	9.6	162	11.6	0.7	0.6
11	4,131	20.37	2,925	28.8	4.3%	4.9%	178	11.0	144	13.6	0.5	0.5
12	4,090	20.52	2,628	31.9	6.0%	7.6%	246	16.2	199	20.1	0.8	0.6
13	2,207	7.50	1,483	11.2	3.3%	4.3%	72	5.7	64	6.4	0.8	0.6
14	1,032	11.42	767	15.4	3.4%	3.8%	35	6.2	29	7.5	0.5	0.5
15	5,051	14.31	3,341	21.6	9.6%	10.7%	483	25.8	356	35.1	1.8	1.6
16	7,377	13.70	5,325	19.0	3.6%	4.5%	264	11.4	237	12.7	0.8	0.7
17	4,520	18.68	2,986	28.3	10.6%	12.7%	478	17.2	379	21.7	0.9	0.8
18	2,774	8.78	1,977	12.3	5.8%	7.2%	161	7.3	143	8.2	0.8	0.7
19	2,478	15.48	1,763	21.8	15.6%	18.1%	387	8.2	319	9.9	0.5	0.5
20	3,756	10.49	2,771	14.2	21.4%	24.8%	805	13.3	687	15.6	1.3	1.1
21	3,232	13.26	2,121	20.2	5.1%	6.7%	166	9.8	142	11.4	0.7	0.6
22	4,027	15.22	2,812	21.8	4.1%	5.1%	166	8.0	144	9.2	0.5	0.4
ALL VA	89,535	15.10	59,545	22.7	8.5%	10.0%	7597	13.6	5949	17.4	0.9	0.8
AVERAGE	4,015	15.0	2,792	22.0	8.1%	9.5%	345	11.9	274	14.9	0.8	0.7
SD	1,482	4.9	1,016	7.6	4.8%	5.3%	250	4.7	184	6.6	0.3	0.3
CV	0.37	0.33	0.36	0.34	0.59	0.56	0.72	0.39	0.67	0.44	0.35	0.39

*Bolted (underlined) values are 1 s.d. above the mean of all VISNs; outlined values are 1 s.d. below the mean.

† Ratio of bed days of care for PTSD treatment compared to bed days of care for all general psychiatry inpatient treatment.

Table 11-2. Comparison of all Domiciliary and PRRP treatment and treatment for PTSD, by VISN, FY 2001.

VISN	All Domiciliary and PRRP Care				Percent Tx. for PTSD		Domiciliary and PRRP Tx. of PTSD				PTSD/Dom. and PRRP		Veterans Treated for PTSD/ U.S. Eligible Veterans*		
	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	All Episodes	Unique Veterans*	Episodes of Care	Bed Days/ Episode*	Unique Veterans	Bed Days/ Vet/Year*	Ratio of Bed Days per ...*†	Episode Vet/Year	VA Eligible (SC/Low Inc)	Total PTSD Episodes of Care††	Total PTSD Episodes/ VA Eligible
1	615	94.2	519	111.6	9.4%	11.0%	58	89.4	57	91.0	0.9	0.8	358,094	823	2.30
2	1,626	60.2	1,279	76.5	14.1%	14.2%	230	16.1	182	20.3	0.3	0.3	194,415	418	2.15
3	2,004	62.9	1,716	73.4	18.4%	19.7%	369	57.0	338	62.2	0.9	0.8	335,211	620	1.85
4	3,080	46.5	2,780	51.5	8.2%	8.7%	252	53.7	243	55.7	1.2	1.1	497,402	681	1.37
5	1,032	81.7	965	87.3	12.3%	13.2%	127	113.9	127	113.9	1.4	1.3	168,218	348	2.07
6	1,712	43.5	1,554	48.0	0.9%	1.0%	16	31.4	16	31.4	0.7	0.7	360,885	929	2.57
7	694	75.6	641	81.9	23.5%	23.1%	163	34.9	148	38.5	0.5	0.5	399,439	949	2.38
8	1,126	67.7	1,036	73.6	15.6%	16.5%	176	64.8	171	66.7	1.0	0.9	482,839	572	1.18
9	936	83.2	888	87.7	0.6%	0.7%	6	244.3	6	244.3	2.9	2.8	367,654	368	1.00
10	2,836	40.1	2,497	45.5	5.3%	5.7%	149	60.1	142	63.1	1.5	1.4	318,983	358	1.12
11	1,031	31.3	883	36.5	34.5%	31.5%	356	24.1	278	30.9	0.8	0.8	427,356	559	1.31
12	2,743	67.1	2,406	76.5	13.5%	14.1%	369	43.4	339	47.3	0.6	0.6	319,235	645	2.02
13	1,505	61.6	1,389	66.8	3.7%	3.7%	55	70.7	52	74.8	1.1	1.1	210,110	125	0.59
14	769	36.9	636	44.6	9.4%	9.3%	72	38.9	59	47.5	1.1	1.1	153,798	136	0.88
15	859	96.1	694	119.0	3.3%	3.6%	28	81.1	25	90.8	0.8	0.8	329,293	452	1.37
16	1,683	54.6	1,573	58.4	23.7%	24.8%	399	33.0	390	33.8	0.6	0.6	651,983	703	1.08
17	2,107	77.8	1,576	104.0	3.7%	3.8%	79	76.6	60	100.9	1.0	1.0	321,378	660	2.05
18	650	65.8	620	69.0	0.3%	0.3%	2	26.5	2	26.5	0.4	0.4	276,151	218	0.79
19	166	41.2	156	43.8	27.7%	29.5%	46	42.0	46	42.0	1.0	1.0	215,445	447	2.07
20	2,350	100.0	2,131	110.2	10.4%	10.5%	245	63.3	224	69.2	0.6	0.6	342,926	1069	3.12
21	972	62.1	866	69.7	30.0%	32.0%	292	56.9	277	59.9	0.9	0.9	338,504	481	1.42
22	862	117.6	836	121.3	10.6%	10.6%	91	182.5	89	186.6	1.6	1.5	418,847	290	0.69
ALL VA	31,358	64.6	27,063	74.9	11.4%	11.9%	3,580	52.9	3,222	58.8	0.8	0.8	7,488,166	11,851	1.58
AVERAGE	1,425	66.7	1,256	75.3	12.7%	13.1%	163	68.4	149	72.6	1.0	0.9	340,371	539	1.61
SD	786.4	22.1	689.0	25.0	9.7%	9.7%	128.4	52.1	117.3	52.0	0.5	0.5	113,742.8	251.7	0.7
CV	0.55	0.33	0.55	0.33	0.77	0.75	0.79	0.76	0.79	0.72	0.54	0.53	0.33	0.47	0.41

*Bolded (underlined) values are 1 s.d. above the mean of all VISNs. Outlined values are 1 s.d. below the mean.

† Ratio of bed days of care for PTSD treatment compared to bed days of care for all domiciliary and PRRP treatment.

†† Includes general psychiatry inpatient episodes (from table 11) and domiciliary and PRRP episodes for veterans with PTSD.

Table 11a. Patients treated for PTSD in general psychiatry inpatient beds and domiciliary and PRRP beds by VISN: FY 2000, FY 2001 and FY 2001-2000 change.

	General Psychiatry Inpatient Treatment of PTSD												Domiciliary and PRRP Care											
	FY 2000				FY 2001				Change				FY 2000				FY 2001				Change			
	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year
1	765	556	15.2	21.0	709	532	14.8	19.7	-7.3%	-4.3%	-3.2%	-6.2%	71	67	90.6	96.0	58	57	89.4	91.0	-18.3%	-14.9%	-1.3%	-5.2%
2	188	155	7.8	9.5	119	89	9.2	12.3	-36.7%	-42.6%	17.8%	29.9%	246	193	16.5	21.0	230	182	16.1	20.3	-6.5%	-5.7%	-2.5%	-3.4%
3	251	203	15.9	19.6	213	176	16.4	19.8	-15.1%	-13.3%	3.2%	1.0%	457	385	42.9	51.0	369	338	57.0	62.2	-19.3%	-12.2%	32.7%	22.1%
4	429	329	13.5	17.7	359	296	16.6	20.1	-16.3%	-10.0%	22.3%	13.7%	303	263	40.4	46.6	252	243	53.7	55.7	-16.8%	-7.6%	32.8%	19.6%
5	221	176	11.6	14.5	179	166	11.6	12.5	-19.0%	-5.7%	-0.2%	-14.3%	177	174	124.2	126.3	127	127	113.9	113.9	-28.2%	-27.0%	-8.3%	-9.9%
6	913	647	17.1	24.1	1028	715	16.0	22.9	12.6%	10.5%	-6.5%	-4.7%	26	26	65.5	65.5	16	16	31.4	31.4	-38.5%	-38.5%	-52.0%	-52.0%
7	786	586	10.2	13.7	646	485	12.3	16.3	-17.8%	-17.2%	20.3%	19.5%	53	52	75.1	76.5	163	148	34.9	38.5	207.5%	184.6%	-53.5%	-49.7%
8	396	313	6.6	8.4	356	284	6.0	7.6	-10.1%	-9.3%	-8.8%	-9.6%	177	157	74.9	84.4	176	171	64.8	66.7	-0.6%	8.9%	-13.4%	-20.9%
9	362	278	9.7	12.6	351	276	10.4	13.2	-3.0%	-0.7%	7.5%	5.0%	10	9	120.7	134.1	6	6	244.3	244.3	-40.0%	-33.3%	102.4%	82.2%
10	209	191	8.0	8.8	196	162	9.6	11.6	-6.2%	-15.2%	19.1%	31.7%	179	169	60.3	63.9	149	142	60.1	63.1	-16.8%	-16.0%	-0.3%	-1.2%
11	203	163	13.5	16.8	178	144	11.0	13.6	-12.3%	-11.7%	-18.3%	-19.0%	384	281	25.7	35.1	356	278	24.1	30.9	-7.3%	-1.1%	-5.9%	-11.8%
12	276	207	13.2	17.6	246	199	16.2	20.1	-10.9%	-3.9%	22.6%	13.7%	402	360	38.3	42.8	369	339	43.4	47.3	-8.2%	-5.8%	13.2%	10.3%
13	70	68	7.5	7.7	72	64	5.7	6.4	2.9%	-5.9%	-23.9%	-16.9%	40	39	53.1	54.5	55	52	70.7	74.8	37.5%	33.3%	33.0%	37.2%
14	64	44	7.0	10.1	35	29	6.2	7.5	-45.3%	-34.1%	-10.4%	-25.7%	86	59	28.2	41.1	72	59	38.9	47.5	-16.3%	0.0%	38.1%	15.6%
15	424	335	27.4	34.7	483	356	25.8	35.1	13.9%	6.3%	-5.6%	1.2%	45	39	44.0	50.8	28	25	81.1	90.8	-37.8%	-35.9%	84.1%	78.7%
16	304	274	10.2	11.4	264	237	11.4	12.7	-13.2%	-13.5%	11.0%	11.4%	408	382	30.7	32.8	399	390	33.0	33.8	-2.2%	2.1%	7.5%	3.0%
17	581	449	20.2	26.1	478	379	17.2	21.7	-17.7%	-15.6%	-14.8%	-16.9%	30	29	100.3	103.7	79	60	76.6	100.9	163.3%	106.9%	-23.6%	-2.8%
18	216	192	7.5	8.5	161	143	7.3	8.2	-25.5%	-25.5%	-3.2%	-3.2%	16	15	86.3	92.0	2	2	26.5	26.5	-87.5%	-86.7%	-69.3%	-71.2%
19	401	320	8.5	10.7	387	319	8.2	9.9	-3.5%	-0.3%	-4.0%	-7.0%	71	68	42.3	44.2	46	46	42.0	42.0	-35.2%	-32.4%	-0.6%	-4.8%
20	824	699	13.9	16.4	805	687	13.3	15.6	-2.3%	-1.7%	-4.2%	-4.8%	231	214	54.2	58.5	245	224	63.3	69.2	6.1%	4.7%	16.8%	18.3%
21	189	163	11.0	12.8	166	142	9.8	11.4	-12.2%	-12.9%	-11.1%	-10.3%	320	303	58.5	61.8	292	277	56.9	59.9	-8.8%	-8.6%	-2.9%	-3.0%
22	199	170	9.8	11.4	166	144	8.0	9.2	-16.6%	-15.3%	-17.9%	-19.2%	91	86	151.2	160.0	91	89	182.5	186.6	0.0%	3.5%	20.7%	16.6%
All VA	8,271	6,414	13.4	17.3	7597	5949	13.6	17.4	-8.1%	-7.2%	1.5%	0.4%	3,823	3,370	50.2	57.0	3,580	3,222	52.9	58.8	-6.4%	-4.4%	5.4%	3.2%
AVG.	376	296	12.1	15.2	345	274	11.9	14.9	-11.9%	-11.0%	-0.4%	-1.4%	174	153	64.7	70.1	163	149	68.4	72.6	1.2%	0.8%	6.7%	3.1%
S.D.	242	179	4.9	6.6	250	184	4.7	6.6	13.6%	12.1%	14.1%	15.8%	148	128	35.2	35.8	131	120	53.3	53.2	64.4%	53.8%	39.9%	35.8%
C.V.	0.64	0.60	0.40	0.43	0.72	0.67	0.39	0.44	-1.14	-1.10	-37.80	-11.40	0.85	0.83	0.54	0.51	0.81	0.81	0.78	0.73	53.93	64.29	5.94	11.65

Table 11b. Percent treated for PTSD in inpatient general psychiatry beds and domiciliary and PRRP beds by VISN: FY 2000, FY 2001 and FY 2001-2000 change.

VISN	Inpatient General Psychiatry						Domiciliary and PRRP					
	FY 2000		FY 2001		% Change: FY 2001-2000		FY 2000		FY 2001		% Change: FY 2001-2000	
	Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD	
	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans*	All Episodes	Unique Veterans
1	14.0%	16.0%	13.6%	15.5%	-2.9%	-3.0%	9.1%	10.4%	9.4%	11.0%	3.9%	5.0%
2	7.6%	9.5%	5.2%	5.8%	-30.9%	-39.7%	11.7%	13.1%	14.1%	14.2%	20.6%	7.9%
3	5.8%	7.3%	5.2%	6.6%	-10.2%	-9.0%	22.6%	23.9%	18.4%	19.7%	-18.4%	-21.5%
4	9.4%	10.5%	8.9%	10.2%	-6.0%	-2.1%	9.5%	9.5%	8.2%	8.7%	-13.5%	-8.1%
5	7.4%	9.3%	5.6%	8.1%	-24.2%	-12.6%	16.9%	17.6%	12.3%	13.2%	-27.1%	-33.5%
6	14.6%	15.7%	15.4%	16.4%	5.7%	4.5%	1.6%	1.7%	0.9%	1.0%	-40.2%	-65.2%
7	15.8%	16.6%	13.2%	14.0%	-16.2%	-15.3%	8.2%	8.7%	23.5%	23.1%	187.2%	62.5%
8	6.8%	7.8%	5.9%	6.8%	-13.6%	-11.9%	17.8%	18.0%	15.6%	16.5%	-12.0%	-9.3%
9	7.5%	8.2%	7.1%	7.8%	-5.9%	-4.2%	1.0%	1.0%	0.6%	0.7%	-35.4%	-42.0%
10	6.1%	8.0%	5.6%	6.6%	-8.0%	-17.4%	6.1%	6.7%	5.3%	5.7%	-13.9%	-17.0%
11	4.5%	5.2%	4.3%	4.9%	-4.8%	-6.2%	37.8%	32.3%	34.5%	31.5%	-8.6%	-2.5%
12	6.1%	7.5%	6.0%	7.6%	-1.8%	0.8%	13.8%	14.3%	13.5%	14.1%	-2.5%	-1.8%
13	3.3%	4.8%	3.3%	4.3%	-2.3%	-9.9%	2.7%	2.9%	3.7%	3.7%	36.1%	23.0%
14	4.3%	4.3%	3.4%	3.8%	-20.8%	-12.2%	11.0%	10.1%	9.4%	9.3%	-15.2%	-8.5%
15	8.8%	10.3%	9.6%	10.7%	9.0%	3.1%	3.5%	3.4%	3.3%	3.6%	-5.6%	6.8%
16	4.3%	5.4%	3.6%	4.5%	-16.8%	-17.0%	17.6%	18.8%	23.7%	24.8%	34.9%	24.1%
17	12.5%	14.5%	10.6%	12.7%	-15.7%	-12.7%	1.5%	1.9%	3.7%	3.8%	148.5%	51.2%
18	6.8%	8.7%	5.8%	7.2%	-14.5%	-17.0%	1.9%	2.0%	0.3%	0.3%	-84.2%	-506.3%
19	15.9%	18.4%	15.6%	18.1%	-2.1%	-1.7%	67.0%	66.0%	27.7%	29.5%	-58.6%	-123.9%
20	21.6%	25.5%	21.4%	24.8%	-0.8%	-2.7%	9.4%	9.6%	10.4%	10.5%	11.1%	8.3%
21	5.7%	7.5%	5.1%	6.7%	-9.9%	-11.0%	26.4%	29.7%	30.0%	32.0%	14.0%	7.0%
22	4.7%	5.8%	4.1%	5.1%	-12.3%	-12.4%	8.0%	7.8%	10.6%	10.6%	32.5%	26.4%
ALL VA	9.1%	10.7%	8.5%	10.0%	-6.4%	-6.6%	11.3%	11.5%	11.4%	11.9%	1.4%	3.2%
AVERAGE	8.8%	10.3%	8.1%	9.5%	-9.3%	-9.5%	13.9%	14.1%	12.7%	13.1%	7.0%	-28.1%
SD	4.7%	5.2%	4.8%	5.3%	9.5%	9.4%	14.6%	14.3%	9.7%	9.7%	60.0%	113.6%
CV	0.54	0.50	0.59	0.56	-1.02	-0.99	1.06	1.01	0.77	0.75	8.60	-4.05

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2001. *

VISN	VAMC	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio	
		Episodes	Bed Days/	Unique	Bed Days/	All	Unique	Episodes	Bed Days/	Unique	Bed Days/	of Bed Days per ... [†]	
		of Care	Episode	Veterans	Vet/Year	Episodes	Veterans	of Care	Episode	Veterans	Vet/Year	Episode	Vet/Year
1	BEDFORD	1,057	13.0	780	17.7	1.4%	1.8%	15	10.3	14	11.1	0.8	0.6
1	BOSTON HCS †	1,484	15.0	943	23.6	6.5%	8.4%	97	8.1	79	10.0	0.5	0.4
1	CONNECTICUT HCS †	611	14.4	424	20.7	8.3%	8.7%	51	7.8	37	10.8	0.5	0.5
1	MANCHESTER	0		0									
1	NORTHAMPTON	847	27.2	638	36.2	52.2%	50.3%	442	19.0	321	26.2	0.7	0.7
1	PROVIDENCE	636	8.3	426	12.4	5.7%	7.3%	36	6.8	31	7.9	0.8	0.6
1	TOGUS	220	17.7	188	20.7	3.6%	4.3%	8	8.4	8	8.4	0.5	0.4
1	WHITE RIVER JCT	355	8.8	258	12.0	16.9%	20.2%	60	6.6	52	7.6	0.7	0.6
2	ALBANY	445	5.7	330	7.7	5.8%	7.0%	26	3.6	23	4.1	0.6	0.5
2	BATH	0		0									
2	CANANDAIGUA	447	39.1	341	51.2	1.8%	2.3%	8	26.3	8	26.3	0.7	0.5
2	SYRACUSE	312	15.0	244	19.1	9.9%	10.7%	31	12.3	26	14.7	0.8	0.8
2	WESTERN NEW YORK HCS †	1,078	8.4	715	12.6	5.0%	4.9%	54	7.6	35	11.7	0.9	0.9
3	BRONX	615	18.6	405	28.3	3.4%	4.7%	21	18.1	19	20.0	1.0	0.7
3	HUDSON VALLEY HCS †	714	32.8	497	47.2	5.7%	7.8%	41	10.6	39	11.1	0.3	0.2
3	NEW JERSEY HCS †	954	43.5	656	63.3	7.3%	8.5%	70	22.8	56	28.5	0.5	0.4
3	NEW YORK HARBOR HCS †	1,265	14.7	938	19.8	4.7%	4.9%	60	12.1	46	15.7	0.8	0.8
3	NORTHPORT	519	56.6	372	79.0	4.0%	4.8%	21	17.0	18	19.8	0.3	0.3
4	ALTOONA	0		0									
4	BUTLER	0		0									
4	CLARKSBURG	264	17.4	232	19.9	29.2%	31.5%	77	37.4	73	39.4	2.1	2.0
4	COATESVILLE	664	27.8	549	33.7	9.3%	10.4%	62	14.8	57	16.1	0.5	0.5
4	ERIE	0		0									
4	LEBANON	491	13.1	340	19.0	3.1%	4.1%	15	10.5	14	11.3	0.8	0.6
4	PHILADELPHIA	998	9.9	727	13.6	8.1%	8.4%	81	10.8	61	14.3	1.1	1.1
4	PITTSBURGH HCS †	1,270	20.1	946	27.0	8.7%	9.4%	111	9.4	89	11.8	0.5	0.4
4	WILKES BARRE	361	11.1	270	14.9	3.6%	4.1%	13	5.6	11	6.6	0.5	0.4
4	WILMINGTON	0		0									
5	MARTINSBURG	564	7.9	384	11.7	9.4%	12.0%	53	6.0	46	7.0	0.8	0.6
5	MARYLAND HCS †	1,585	28.6	1,092	41.5	5.2%	7.5%	83	17.9	82	18.1	0.6	0.4
5	WASHINGTON	1,060	6.5	719	9.5	4.1%	5.7%	43	6.0	41	6.3	0.9	0.7

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2001. *

VISN	VAMC	<u>All General Psychiatry Inpatient Care</u>				<u>Percent Tx. for PTSD</u>		<u>Inpatient Treatment of PTSD</u>				<u>PTSD/General Psych Ratio</u>	
		<i>Episodes</i>	<i>Bed Days/</i>	<i>Unique</i>	<i>Bed Days/</i>	<i>All</i>	<i>Unique</i>	<i>Episodes</i>	<i>Bed Days/</i>	<i>Unique</i>	<i>Bed Days/</i>	<i>of Bed Days per ... ‡</i>	
		<i>of Care</i>	<i>Episode</i>	<i>Veterans</i>	<i>Vet/Year</i>	<i>Episodes</i>	<i>Veterans</i>	<i>of Care</i>	<i>Episode</i>	<i>Veterans</i>	<i>Vet/Year</i>	<i>Episode</i>	<i>Vet/Year</i>
6	ASHEVILLE	404	8.1	326	10.1	26.5%	27.3%	107	7.8	89	9.4	1.0	0.9
6	BECKLEY	0		0									
6	DURHAM	879	8.2	660	10.9	10.9%	12.6%	96	7.4	83	8.5	0.9	0.8
6	FAYETTEVILLE NC	583	10.8	417	15.0	6.0%	7.7%	35	10.8	32	11.8	1.0	0.8
6	HAMPTON	1,772	10.3	943	19.3	15.0%	14.7%	266	12.5	139	23.9	1.2	1.2
6	RICHMOND	662	7.3	478	10.1	0.5%	0.6%	3	7.3	3	7.3	1.0	0.7
6	SALEM	1,008	21.9	724	30.4	32.1%	29.1%	324	14.0	211	21.5	0.6	0.7
6	SALISBURY	1,369	25.6	1,052	33.3	14.4%	17.3%	197	33.5	182	36.2	1.3	1.1
7	ATLANTA	1,093	9.7	789	13.5	11.6%	13.4%	127	8.5	106	10.2	0.9	0.8
7	AUGUSTA	1,078	16.0	774	22.3	18.6%	18.6%	200	16.4	144	22.8	1.0	1.0
7	BIRMINGHAM	0		0									
7	CENTRAL ALABAMA VETERANS HCS †	1,101	14.3	732	21.5	18.2%	18.7%	200	11.2	137	16.4	0.8	0.8
7	CHARLESTON	496	8.5	383	11.1	8.1%	8.9%	40	5.3	34	6.2	0.6	0.6
7	COLUMBIA SC	513	7.1	404	9.0	8.2%	9.4%	42	6.2	38	6.9	0.9	0.8
7	DUBLIN	0		0									
7	TUSCALOOSA	611	35.5	499	43.4	6.1%	6.6%	37	22.4	33	25.2	0.6	0.6
8	BAY PINES	1,131	6.0	795	8.5	7.3%	9.4%	82	5.7	75	6.2	0.9	0.7
8	MIAMI	747	9.8	579	12.6	2.0%	2.4%	15	6.4	14	6.9	0.7	0.5
8	NO. FLORIDA/SO. GEORGIA VETERANS HS †	1,228	5.1	922	6.8	4.6%	5.6%	56	4.2	52	4.5	0.8	0.7
8	SAN JUAN	730	11.5	565	14.9	5.8%	6.9%	42	10.2	39	10.9	0.9	0.7
8	TAMPA	1,098	6.0	790	8.3	3.8%	4.7%	42	5.7	37	6.4	0.9	0.8
8	W PALM BEACH	1,096	6.4	619	11.4	10.9%	11.5%	119	5.7	71	9.6	0.9	0.8
9	HUNTINGTON	0		0									
9	LEXINGTON	587	9.4	498	11.0	4.4%	4.8%	26	6.0	24	6.5	0.6	0.6
9	LOUISVILLE	769	5.8	534	8.4	2.9%	4.1%	22	4.4	22	4.4	0.8	0.5
9	MEMPHIS	711	9.9	539	13.1	12.2%	11.9%	87	10.1	64	13.8	1.0	1.1
9	MIDDLE TENNESSE HCS: Murfreesboro	68	138.1	68	138.1	2.9%	2.9%	2	5.0	2	5.0	0.0	0.0
9	MIDDLE TENNESSE HCS: Nashville	2,097	15.7	1,450	22.7	6.2%	6.9%	129	14.7	100	18.9	0.9	0.8
9	MOUNTAIN HOME	722	7.6	547	10.1	11.8%	12.4%	85	7.2	68	9.0	0.9	0.9
10	CHILLICOTHE	1,178	12.0	831	17.1	6.9%	7.9%	81	11.2	66	13.8	0.9	0.8
10	CINCINNATI	485	12.5	380	15.9	7.8%	8.7%	38	8.6	33	9.9	0.7	0.6
10	CLEVELAND	1,169	21.0	883	27.8	2.7%	3.3%	31	7.1	29	7.6	0.3	0.3
10	DAYTON	659	8.8	464	12.5	7.0%	7.5%	46	9.2	35	12.0	1.0	1.0

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2001. *

VISN	VAMC	<u>All General Psychiatry Inpatient Care</u>				<u>Percent Tx. for PTSD</u>		<u>Inpatient Treatment of PTSD</u>				<u>PTSD/General Psych Ratio</u>	
		<i>Episodes</i>	<i>Bed Days/</i>	<i>Unique</i>	<i>Bed Days/</i>	All	Unique	<i>Episodes</i>	<i>Bed Days/</i>	<i>Unique</i>	<i>Bed Days/</i>	<i>of Bed Days per ...†</i>	
		<i>of Care</i>	<i>Episode</i>	<i>Veterans</i>	<i>Vet/Year</i>	Episodes	Veterans	<i>of Care</i>	<i>Episode</i>	<i>Veterans</i>	<i>Vet/Year</i>	<i>Episode</i>	<i>Vet/Year</i>
11	ALLEN PARK	779	8.8	587	11.7	1.7%	2.0%	13	4.7	12	5.1	0.5	0.4
11	ANN ARBOR HCS	504	9.2	408	11.4	6.0%	5.6%	30	7.8	23	10.1	0.8	0.9
11	BATTLE CREEK	1,585	19.3	1,136	27.0	4.6%	5.5%	73	12.9	62	15.2	0.7	0.6
11	DANVILLE, IL	479	24.7	351	33.7	1.9%	2.3%	9	14.4	8	16.3	0.6	0.5
11	INDIANAPOLIS	344	8.1	269	10.4	4.7%	5.6%	16	7.6	15	8.1	0.9	0.8
11	NORTHERN INDIANA HCS †	440	62.2	352	77.7	8.4%	8.2%	37	12.7	29	16.2	0.2	0.2
11	SAGINAW	0		0									
12	CHICAGO HCS †	1,382	14.0	889	21.8	8.1%	10.5%	112	17.7	93	21.3	1.3	1.0
12	HINES	701	9.3	525	12.4	4.6%	5.7%	32	8.1	30	8.7	0.9	0.7
12	IRON MOUNTAIN	0		0									
12	MADISON	364	11.9	274	15.8	6.3%	6.6%	23	9.7	18	12.4	0.8	0.8
12	MILWAUKEE	740	6.5	517	9.3	4.9%	5.8%	36	6.8	30	8.1	1.0	0.9
12	NORTH CHICAGO	603	44.1	424	62.7	5.3%	6.1%	32	36.6	26	45.1	0.8	0.7
12	TOMAH	300	74.3	259	86.0	3.7%	4.2%	11	10.1	11	10.1	0.1	0.1
13	BLACK HILLS HCS †	326	11.7	218	17.5	4.3%	5.0%	14	7.9	11	10.1	0.7	0.6
13	FARGO	269	7.8	183	11.5	1.5%	1.6%	4	11.8	3	15.7	1.5	1.4
13	MINNEAPOLIS	673	8.6	498	11.6	4.6%	5.8%	31	5.4	29	5.7	0.6	0.5
13	SIOUX FALLS	205	5.5	156	7.2	4.4%	5.1%	9	4.8	8	5.4	0.9	0.7
13	ST CLOUD	734	5.1	475	7.8	1.9%	2.7%	14	3.1	13	3.3	0.6	0.4
14	CENTRAL IOWA HCS†	353	10.9	296	13.0	3.1%	3.0%	11	3.8	9	4.7	0.4	0.4
14	IOWA CITY	293	11.5	240	14.0	4.1%	4.2%	12	6.8	10	8.1	0.6	0.6
14	NEBRASKA/CENT-WESTERN IOWA HCS †	386	11.9	308	14.9	3.1%	3.2%	12	7.9	10	9.5	0.7	0.6
15	COLUMBIA MO	339	7.7	264	9.8	9.1%	10.2%	31	8.3	27	9.5	1.1	1.0
15	EASTERN KANSAS HCS †	1,865	23.8	1,139	39.0	15.4%	18.8%	288	37.7	214	50.7	1.6	1.3
15	KANSAS CITY	916	10.8	671	14.8	2.5%	3.0%	23	14.3	20	16.4	1.3	1.1
15	MARION IL	158	6.4	130	7.7	5.7%	6.9%	9	7.1	9	7.1	1.1	0.9
15	POPLAR BLUFF	0		0									
15	ST. LOUIS	1,773	8.1	1,281	11.2	7.4%	7.7%	132	7.4	98	9.9	0.9	0.9
15	WICHITA	0		0									

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2001. *

VISN	VAMC	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio	
		Episodes	Bed Days/	Unique	Bed Days/	All	Unique	Episodes	Bed Days/	Unique	Bed Days/	of Bed Days per ...†	
		of Care	Episode	Veterans	Vet/Year	Episodes	Veterans	of Care	Episode	Veterans	Vet/Year	Episode	Vet/Year
16	ALEXANDRIA	465	33.5	351	44.3	3.2%	4.3%	15	35.7	15	35.7	1.1	0.8
16	CENTRAL ARKANSAS VET. HCS (No. Little Rock)	1,273	15.7	852	23.5	5.3%	6.8%	67	13.7	58	15.8	0.9	0.7
16	FAYETTEVILLE AR	442	6.2	368	7.5	8.1%	8.4%	36	5.8	31	6.8	0.9	0.9
16	GULF COAST VETERANS HCS (Biloxi)	1,046	21.2	823	27.0	1.3%	1.5%	14	22.9	12	26.8	1.1	1.0
16	HOUSTON	1,213	11.0	895	14.9	3.4%	4.5%	41	6.9	40	7.0	0.6	0.5
16	JACKSON	623	11.0	465	14.8	4.8%	5.6%	30	12.0	26	13.8	1.1	0.9
16	MUSKOGEE	0		0									
16	NEW ORLEANS	604	6.6	420	9.4	4.8%	6.2%	29	5.3	26	5.9	0.8	0.6
16	OKLAHOMA CITY	1,056	10.6	794	14.0	2.5%	3.3%	26	6.9	26	6.9	0.7	0.5
16	SHREVEPORT	655	8.0	500	10.4	0.9%	1.2%	6	7.0	6	7.0	0.9	0.7
17	CENTRAL TEXAS VETERANS HCS †	1,529	36.8	1,092	51.5	11.5%	13.8%	176	32.5	151	37.9	0.9	0.7
17	NORTH TEXAS HCS †	1,162	9.8	951	12.0	4.4%	5.2%	51	6.5	49	6.7	0.7	0.6
17	SOUTH TEXAS VETERANS HCS †	1,829	9.2	1,032	16.3	13.7%	18.0%	251	8.7	186	11.7	0.9	0.7
18	AMARILLO	0		0									
18	NEW MEXICO HCS (Albuquerque)	644	10.8	471	14.7	6.5%	8.3%	42	6.7	39	7.2	0.6	0.5
18	NORTHERN ARIZONA HCS (Prescott)	0		0									
18	PHOENIX	1,376	8.0	935	11.7	5.1%	6.2%	70	7.8	58	9.4	1.0	0.8
18	SOUTHERN ARIZONA HCS (Tucson)	527	7.2	414	9.2	6.1%	7.5%	32	6.1	31	6.3	0.9	0.7
18	WEST TEXAS HCS (Big Spring)	227	11.8	185	14.5	7.5%	8.1%	17	8.9	15	10.1	0.8	0.7
19	CHEYENNE	0		0									
19	DENVER	1,022	15.6	766	20.8	25.9%	29.0%	265	7.8	222	9.4	0.5	0.5
19	GRAND JUNCTION	265	7.6	193	10.5	11.7%	13.5%	31	7.8	26	9.3	1.0	0.9
19	MONTANA HCS †	163	6.6	130	8.3	7.4%	6.2%	12	5.8	8	8.6	0.9	1.0
19	SALT LAKE CITY HCS	619	9.9	441	13.9	6.8%	7.9%	42	8.8	35	10.6	0.9	0.8
19	SHERIDAN	409	32.4	303	43.7	9.0%	9.9%	37	11.1	30	13.7	0.3	0.3
20	ALASKA HCS & RO (Anchorage)	0		0									
20	BOISE	367	9.0	265	12.4	21.3%	20.8%	78	14.5	55	20.6	1.6	1.7
20	PORTLAND	740	8.9	573	11.5	6.9%	7.5%	51	6.5	43	7.7	0.7	0.7
20	PUGET SOUND HCS †	1,579	11.6	1,184	15.4	27.9%	32.7%	440	11.8	387	13.5	1.0	0.9
20	ROSEBURG HCS	707	12.3	541	16.1	27.7%	32.3%	196	19.5	175	21.8	1.6	1.4
20	SPOKANE	250	7.4	194	9.6	10.0%	12.9%	25	6.2	25	6.2	0.8	0.6
20	WALLA WALLA	113	6.4	90	8.1	13.3%	15.6%	15	3.5	14	3.7	0.5	0.5

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2001. *

VISN	VAMC	<u>All General Psychiatry Inpatient Care</u>				<u>Percent Tx. for PTSD</u>		<u>Inpatient Treatment of PTSD</u>				<u>PTSD/General Psych Ratio</u>	
		<i>Episodes of Care</i>	<i>Bed Days/ Episode</i>	<i>Unique Veterans</i>	<i>Bed Days/ Vet/Year</i>	<i>All Episodes</i>	<i>Unique Veterans</i>	<i>Episodes of Care</i>	<i>Bed Days/ Episode</i>	<i>Unique Veterans</i>	<i>Bed Days/ Vet/Year</i>	<i>of Bed Days per ... ‡</i>	<i>Episode Vet/Year</i>
21	CENTRAL CALIFORNIA HCS (Fresno)	378	5.5	251	8.3	5.3%	7.2%	20	3.6	18	4.0	0.7	0.5
21	HONOLULU	433	8.8	213	17.9	5.3%	8.9%	23	5.8	19	7.1	0.7	0.4
21	NORTHERN CALIFORNIA HCS †	0		0									
21	PALO ALTO HCS †	1,653	17.8	1,119	26.3	4.7%	6.0%	77	12.9	67	14.8	0.7	0.6
21	SAN FRANCISCO	264	13.2	212	16.4	10.6%	9.9%	28	9.5	21	12.7	0.7	0.8
21	SIERRA NEVADA HCS (Reno)	504	8.1	383	10.7	3.6%	4.7%	18	8.8	18	8.8	1.1	0.8
22	GREATER LOS ANGELES HCS †	1,678	21.7	1,167	31.2	3.5%	4.3%	59	10.5	50	12.4	0.5	0.4
22	LOMA LINDA	612	6.2	477	8.0	4.4%	5.5%	27	4.6	26	4.7	0.7	0.6
22	LONG BEACH HCS	652	10.8	469	15.0	4.1%	4.1%	27	6.4	19	9.1	0.6	0.6
22	SAN DIEGO HCS	691	16.0	510	21.7	4.1%	4.9%	28	9.5	25	10.7	0.6	0.5
22	SOUTHERN NEVADA HCS (Las Vegas)	394	7.6	320	9.4	6.3%	7.5%	25	5.9	24	6.2	0.8	0.7
ALL VA		89535	15.1	59545	22.7	8.5%	10.0%	7597	13.6	5949	17.4	0.9	0.8
AVERAGE		658	15.8	472	21.1	8.1%	9.1%	65	10.8	53	12.8	0.8	0.7
SD		497	16.4	339	18.8	7.5%	7.6%	81	7.3	62	8.7	0.3	0.3
CV		0.75	1.04	0.72	0.89	0.93	0.84	1.24	0.68	1.17	0.68	0.37	0.40

*Outlined values are greater than 1 s.d. from the mean in the undesirable direction.

† Data are not comparable to previous reports due to consolidation.

‡ Ratio of bed days of care for PTSD treatment compared to bed days of care for all general psychiatry inpatient treatment.

Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2001.

VISN VAMC	CODE	All Domiciliary and PRRP Care				Percent Tx. for PTSD		Domiciliary and PRRP Tx. of PTSD				PTSD/Dom. and PRRP	
		<i>Episodes</i>	<i>Bed Days/</i>	<i>Unique</i>	<i>Bed Days/</i>	All	Unique	<i>Episodes</i>	<i>Bed Days/</i>	<i>Unique</i>	<i>Bed Days/</i>	Ratio of Bed Days per ...†	
		<i>of Care</i>	<i>Episode</i>	<i>Veterans</i>	<i>Vet/Year</i>	Episodes	Veterans	<i>of Care</i>	<i>Episode</i>	<i>Veterans</i>	<i>Vet/Year</i>	<i>Episode</i>	<i>Vet/Year</i>
1 BEDFORD	518	161	124.6	132	152.0	4.3%	5.3%	7	139.7	7	139.7	1.1	0.9
1 BOSTON HCS †	523	375	77.9	334	87.5	7.7%	8.7%	29	89.2	29	89.2	1.1	1.0
1 CONNECTICUT HCS †	689	46	84.8	46	84.8	47.8%	47.8%	22	73.8	22	73.8	0.9	0.9
1 NORTHAMPTON	631	33	143.5	33	143.5	0.0%	0.0%					0.0	
2 ALBANY	500												
2 BATH	514	3	60.3	3	60.3	0.0%	0.0%					0.0	0.0
2 WESTERN NEW YORK HCS †	528	1623	60.2	1278	76.4	14.2%	14.2%	230	16.1	182	20.3	0.3	0.3
3 HUDSON VALLEY HCS †	620	649	70.7	614	74.7	25.3%	25.1%	164	74.7	154	79.6	1.1	1.1
3 NEW JERSEY HCS †	561	871	56.3	766	64.1	21.0%	21.9%	183	37.9	168	41.3	0.7	0.6
3 NEW YORK HARBOR HCS †	630	370	52.7	330	59.1	0.0%	0.0%					0.0	0.0
3 NORTHPORT	632	114	101.2	100	115.3	19.3%	20.0%	22	83.8	20	92.2	0.8	0.8
4 BUTLER	529	226	79.1	218	82.0	0.0%	0.0%					0.0	0.0
4 CLARKSBURG	540	146	20.9	142	21.5	6.2%	6.3%	9	54.7	9	54.7	2.6	2.5
4 COATESVILLE	542	1615	45.1	1522	47.9	14.4%	14.7%	232	52.1	223	54.2	1.2	1.1
4 LEBANON	595	383	43.6	373	44.8	0.0%	0.0%					0.0	0.0
4 PHILADELPHIA	642												
4 PITTSBURGH HCS †	646	552	54.6	502	60.0	2.0%	2.2%	11	87.1	11	87.1	1.6	1.5
4 WILKES BARRE	693	158	17.0	149	18.0	0.0%	0.0%					0.0	0.0
5 MARTINSBURG	613	619	100.4	594	104.6	20.5%	21.4%	127	113.9	127	113.9	1.1	1.1
5 MARYLAND HCS †	512	413	53.6	382	58.0	0.0%	0.0%					0.0	0.0
6 ASHEVILLE	637	238	22.4	224	23.8	0.0%	0.0%					0.0	0.0
6 HAMPTON	590	940	56.5	846	62.8	1.7%	1.9%	16	31.4	16	31.4	0.6	0.5
6 SALEM	658	225	23.0	215	24.0	0.0%	0.0%					0.0	0.0
6 SALISBURY	659	309	35.2	306	35.6	0.0%	0.0%					0.0	0.0
7 ATLANTA	508	15	119.5	14	128.1	0.0%	0.0%					0.0	0.0
7 AUGUSTA	509	178	75.6	174	77.3	19.7%	19.5%	35	61.1	34	62.9	0.8	0.8
7 CENTRAL ALABAMA VETERANS HCS	619												
7 DUBLIN	557	501	74.3	456	81.7	25.5%	25.0%	128	27.8	114	31.2	0.4	0.4
8 BAY PINES	516	621	76.5	563	84.4	16.3%	17.4%	101	68.8	98	70.9	0.9	0.8
8 MIAMI	546	279	47.7	266	50.1	25.4%	25.9%	71	54.4	69	55.9	1.1	1.1
8 NO. FLORIDA/SO. GEORGIA VETERANS HS †	573	180	54.9	162	61.0	0.6%	0.6%	1	94.0	1	94.0	1.7	1.5
8 TAMPA	673	46	120.6	46	120.6	6.5%	6.5%	3	169.7	3	169.7	1.4	1.4
9 MEMPHIS	614	370	12.1	361	12.4	0.0%	0.0%					0.0	0.0
9 MOUNTAIN HOME	621	566	129.8	528	139.1	1.1%	1.1%	6	244.3	6	244.3	1.9	1.8

Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2001.

VISN VAMC	CODE	All Domiciliary and PRRP Care				Percent Tx. for PTSD		Domiciliary and PRRP Tx. of PTSD				PTSD/Dom. and PRRP	
		Episodes	Bed Days/	Unique	Bed Days/	All	Unique	Episodes	Bed Days/	Unique	Bed Days/	Ratio of Bed Days per ...†	
		of Care	Episode	Veterans	Vet/Year	Episodes	Veterans	of Care	Episode	Veterans	Vet/Year	Episode	Vet/Year
10 CHILLICOTHE	538	359	50.3	328	55.0	0.0%	0.0%					0.0	0.0
10 CINCINNATI	539	623	43.7	535	50.9	10.4%	12.0%	65	44.3	64	45.0	1.0	0.9
10 CLEVELAND	541	1283	29.9	1134	33.8	1.9%	2.0%	24	76.9	23	80.2	2.6	2.4
10 DAYTON	552	571	52.8	535	56.3	10.5%	10.5%	60	70.6	56	75.6	1.3	1.3
11 BATTLE CREEK	515	991	28.7	854	33.3	35.9%	32.6%	356	24.1	278	30.9	0.8	0.9
11 INDIANAPOLIS	583	40	95.7	29	132.0	0.0%	0.0%					0.0	0.0
12 CHICAGO HCS †	537	211	32.2	205	33.2	0.0%	0.0%					0.0	0.0
12 HINES	578	560	32.4	530	34.2	3.8%	3.8%	21	27.6	20	29.0	0.9	0.8
12 IRON MOUNTAIN	585	112	50.9	108	52.8	2.7%	2.8%	3	162.3	3	162.3	3.2	3.1
12 MADISON	607	37	123.4	35	130.4	0.0%	0.0%					0.0	0.0
12 MILWAUKEE	695	509	132.1	501	134.2	4.3%	4.4%	22	123.1	22	123.1	0.9	0.9
12 NORTH CHICAGO	556	1058	68.1	926	77.8	24.7%	25.6%	261	34.3	237	37.8	0.5	0.5
12 TOMAH	676	256	37.3	240	39.8	24.2%	25.8%	62	53.0	62	53.0	1.4	1.3
13 BLACK HILLS HCS †	568	615	75.2	546	84.7	0.7%	0.7%	4	139.3	4	139.3	1.9	1.6
13 ST CLOUD	656	890	52.2	847	54.9	5.7%	5.7%	51	65.3	48	69.4	1.2	1.3
14 CENTRAL IOWA HCS†	555	2	32.5	2	32.5	50.0%	0.0%	1					
14 NEBRASKA/CENT-WESTERN IOWA HCS †	636	767	36.9	635	44.6	9.3%	9.1%	71	39.0	58	47.7	1.1	1.1
15 EASTERN KANSAS HCS †	677	648	104.3	611	110.6	3.2%	3.4%	21	92.4	21	92.4	0.9	0.8
15 HEARTLAND-EAST HCS	657	2	38.5	2	38.5	0.0%	0.0%					0.0	0.0
15 HEARTLAND-WEST HCS	589	209	71.4	206	72.4	3.3%	3.4%	7	47.0	7	47.0	0.7	0.6
15 MARION IL	609												
16 ALEXANDRIA	502												
16 CENTRAL ARKANSAS VET. HCS (No.Little Roc)	598	766	48.4	710	52.2	31.2%	33.2%	239	30.4	236	30.8	0.6	0.6
16 GULF COAST HCS (Biloxi)	520	498	82.8	477	86.5	2.6%	2.7%	13	119.6	13	119.6	1.4	1.4
16 HOUSTON	580	22	27.9	22	27.9	0.0%	0.0%					0.0	0.0
16 JACKSON	586	278	23.5	268	24.4	26.6%	26.9%	74	26.8	72	27.5	1.1	1.1
16 NEW ORLEANS	629	73	32.5	70	33.9	100.0%	100.0%	73	32.5	70	33.9	1.0	1.0
16 OKLAHOMA CITY	635	44	92.7	41	99.4	0.0%	0.0%					0.0	0.0
16 SHREVEPORT	667	2	3.5	2	3.5	0.0%	0.0%					0.0	0.0
17 CENTRAL TEXAS VETERANS HCS †	674	756	110.6	706	118.5	9.1%	7.1%	69	84.6	50	116.7	0.8	1.0
17 NORTH TEXAS HCS †	549	1351	59.4	893	89.9	0.7%	1.1%	10	21.8	10	21.8	0.4	0.2
18 NEW MEXICO HCS (Albuquerque)	501	153	47.9	140	52.4	0.0%	0.0%					0.0	0.0
18 NORTHERN ARIZONA HCS (Prescott)	649	308	102.5	301	104.8	0.6%	0.7%	2	26.5	2	26.5	0.3	0.3
18 SOUTHERN ARIZONA HCS (Tucson)	678	189	20.6	184	21.2	0.0%	0.0%					0.0	0.0

Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2001.

VISN VAMC	CODE	<u>All Domiciliary and PRRP Care</u>				<u>Percent Tx. for PTSD</u>		<u>Domiciliary and PRRP Tx. of PTSD</u>				<u>PTSD/Dom. and PRRP</u>	
		<i>Episodes</i>	<i>Bed Days/</i>	<i>Unique</i>	<i>Bed Days/</i>	<i>All</i>	<i>Unique</i>	<i>Episodes</i>	<i>Bed Days/</i>	<i>Unique</i>	<i>Bed Days/</i>	<u>Ratio of Bed Days per ...‡</u>	
		<i>of Care</i>	<i>Episode</i>	<i>Veterans</i>	<i>Vet/Year</i>	<i>Episodes</i>	<i>Veterans</i>	<i>of Care</i>	<i>Episode</i>	<i>Veterans</i>	<i>Vet/Year</i>	<i>Episode</i>	<i>Vet/Year</i>
19 SHERIDAN	666	166	41.2	156	43.8	27.7%	29.5%	46	42.0	46	42.0	1.0	1.0
20 ALASKA HCS & RO (Anchorage)	463	211	100.0	160	131.8	17.1%	17.5%	36	101.0	28	129.8	1.0	1.0
20 BOISE	531	155	18.1	153	18.4	0.0%	0.0%					0.0	0.0
20 PORTLAND	648	94	90.6	87	97.9	0.0%	0.0%					0.0	0.0
20 PUGET SOUND HCS †	663	427	58.8	398	63.1	40.7%	41.2%	174	42.8	164	45.4	0.7	0.7
20 ROSEBURG HCS	653	193	26.8	180	28.8	0.5%	0.6%	1	0.0	1	0.0	0.0	0.0
20 WALLA WALLA	687	327	21.3	313	22.2	2.1%	2.2%	7	31.9	7	31.9	1.5	1.4
20 WHITE CITY	692	943	175.2	897	184.2	2.9%	2.9%	27	155.7	26	161.7	0.9	0.9
21 CENTRAL CALIFORNIA HCS (Fresno)	570												
21 HONOLULU	459	57	59.4	56	60.5	96.5%	96.4%	55	60.5	54	61.6	1.0	1.0
21 PALO ALTO HCS †	640	904	61.3	799	69.3	26.2%	27.9%	237	56.0	223	59.6	0.9	0.9
21 SAN FRANCISCO	662	11	145.8	11	145.8	0.0%	0.0%					0.0	0.0
22 GREATER LOS ANGELES HCS †	691	773	129.4	751	133.2	11.8%	11.9%	91	182.5	89	186.6	1.4	1.4
22 LONG BEACH	600	89	15.1	88	15.2	0.0%	0.0%						0.0
ALL VA		31358	64.6	27063	74.9	11.4%	11.9%	3580	52.9	3222	58.8	0.8	0.8
AVERAGE		413	64	373	70	11.4%	10.9%	72	73.2	67	76.2	0.7	0.7
SD		380	37.2	329	40.2	18.8%	18.4%	84	49.8	75	50.3	0.7	0.7
CV		0.92	0.58	0.88	0.58	1.65	1.68	1.17	0.68	1.11	0.66	0.97	0.97

† Data are not comparable to previous reports due to consolidation.

‡ Ratio of bed days of care for PTSD treatment compared to bed days of care for all general psychiatry inpatient treatment.

Data for TABLE 13 are not available for this fiscal year.

Table 14. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2000-March 31, 2001).*

<i>VISN</i>	<i>Number of Unique Patients w PTSD Dx.</i>	<i>Average Length Of Stay (Index stay)</i>	<i>Bed Days 6 months After DC</i>	<i>Number of Admissions 6 months After D/C</i>	<i>% Readm. within 14 d days</i>	<i>% Readm. within 30 days</i>	<i>% Readm. within 180 days</i>	<i>Days to Readm. First Year After D/C</i>	<i>Inpatient Summary Score Average Z: Weighted</i>
1	295	14.9	8.0	0.45	4.4%	8.5%	38.0%	98.0	0.17
2	44	8.8	5.4	0.41	6.8%	9.1%	25.0%	71.7	-0.03
3	86	14.9	6.7	0.50	5.8%	11.6%	32.6%	58.9	0.83
4	165	16.8	6.0	0.41	3.0%	6.7%	26.1%	71.3	0.14
5	80	9.5	1.9	0.25	1.3%	5.0%	21.3%	75.2	-1.09
6	347	16.6	8.0	0.50	3.5%	9.2%	35.7%	79.4	0.61
7	250	13.4	5.3	0.45	4.4%	6.4%	32.4%	80.7	0.00
8	128	6.4	2.7	0.43	5.5%	7.8%	25.0%	56.5	-0.20
9	135	10.4	5.3	0.53	6.7%	12.6%	28.9%	54.1	0.66
10	69	9.0	3.5	0.41	1.4%	2.9%	23.2%	83.2	-0.75
11	74	13.0	4.8	0.49	9.5%	12.2%	28.4%	66.2	0.47
12	87	15.8	6.7	0.51	4.6%	12.6%	31.0%	61.5	0.79
13	27	7.1	3.9	0.59	3.7%	14.8%	40.7%	73.1	0.30
14	15	4.7	1.5	0.33	0.0%	6.7%	26.7%	39.0	-0.45
15	179	31.4	4.5	0.45	4.5%	8.4%	26.8%	75.5	0.57
16	100	12.1	4.3	0.29	3.0%	4.0%	21.0%	76.4	-0.64
17	196	22.8	5.4	0.35	3.1%	6.6%	25.0%	72.5	0.13
18	71	6.4	2.8	0.42	4.2%	8.5%	26.8%	78.8	-0.57
19	175	8.1	3.4	0.32	3.4%	6.3%	21.1%	67.0	-0.59
20	342	14.3	3.4	0.30	3.2%	5.6%	22.5%	70.2	-0.49
21	66	11.7	4.3	0.32	1.5%	6.1%	27.3%	68.8	-0.40
22	61	7.7	4.9	0.64	6.6%	13.1%	31.1%	69.4	0.53
ALL VA	2,992	14.5	5.2	0.42	4.0%	8.0%	29.0%	75.0	0.05
AVERAGE	136	12.5	4.7	0.42	4.1%	8.4%	28.0%	70.3	0.00
SD	98	6.1	1.7	0.10	2.2%	3.2%	5.4%	11.9	0.56
CV	0.72	0.5	0.4	0.24	0.53	0.38	0.19	0.17	

* Outlined values are 1 standard deviation from the mean and reflect high levels of inpatient service use.

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2000-March 31, 2001), by VAMC. †*

<i>V/ISN</i>	<i>STATION</i>	<i>CODE</i>	<i>Number of Unique Patients w PTSD Dx.</i>	<i>Average Length Of Stay (Index stay)</i>	<i>Bed Days 6 months After DC</i>	<i>Number of Admissions 6 months After D/C</i>	<i>% Readm. within 14 d ays</i>	<i>% Readm. within 30 days</i>	<i>% Readm. within 180 days</i>	<i>Days to Readm. First Year After D/C</i>
1	BEDFORD	518	4	5.0	4.25	0.50	0.0%	0.0%	25.0%	147.00
1	BOSTON HCS †	523	39	7.5	5.77	0.59	12.8%	23.1%	38.5%	50.20
1	CONNECTICUT HCS †	689	19	7.9	4.32	0.42	5.3%	15.8%	42.1%	67.00
1	NORTHAMPTON	631	191	19.2	9.96	0.44	2.6%	4.7%	41.9%	113.88
1	PROVIDENCE	650	14	6.9	2.71	0.36	0.0%	0.0%	14.3%	67.00
1	TOGUS	402	4	13.8	0.00	0.00	0.0%	0.0%	0.0%	NA
1	WHITE RIVER JCT	405	24	5.0	3.75	0.42	8.3%	16.7%	25.0%	50.00
2	ALBANY	500	12	3.9	0.00	0.00	0.0%	0.0%	0.0%	NA
2	CANANDAIGUA	532	2	32.0	49.00	0.50	0.0%	0.0%	50.0%	65.00
2	SYRACUSE	670	12	13.6	1.33	0.17	0.0%	0.0%	16.7%	130.50
2	WESTERN NEW YORK HCS †	528	18	6.2	6.89	0.83	16.7%	22.2%	44.4%	57.88
3	BRONX	526	10	15.2	6.20	0.20	0.0%	0.0%	10.0%	78.00
3	HUDSON VALLEY HCS †	620	19	7.1	2.21	0.26	5.3%	5.3%	15.8%	29.67
3	NEW JERSEY HCS †	561	31	16.8	9.26	0.71	9.7%	22.6%	48.4%	60.73
3	NEW YORK HARBOR HCS †	630	17	15.8	9.82	0.76	5.9%	11.8%	47.1%	63.63
3	NORTHPORT	632	9	23.1	2.33	0.11	0.0%	0.0%	11.1%	63.00
4	CLARKSBURG	540	40	36.6	5.73	0.18	0.0%	2.5%	15.0%	63.50
4	COATESVILLE	542	32	16.0	4.09	0.44	3.1%	3.1%	21.9%	71.43
4	LEBANON	595	5	7.6	6.80	0.60	0.0%	0.0%	20.0%	55.00
4	PHILADELPHIA	642	39	10.6	9.03	0.74	5.1%	12.8%	41.0%	72.31
4	PITTSBURGH HCS †	646	46	7.2	4.87	0.28	4.3%	8.7%	26.1%	75.42
4	WILKES BARRE	693	3	4.3	4.67	0.33	0.0%	0.0%	33.3%	67.00
5	MARTINSBURG	613	22	6.7	2.27	0.32	0.0%	9.1%	27.3%	42.50
5	MARYLAND HCS †	512	30	15.2	0.63	0.07	0.0%	0.0%	3.3%	144.00
5	WASHINGTON	688	28	5.7	3.00	0.39	3.6%	7.1%	35.7%	88.00
6	ASHEVILLE	637	34	7.4	3.91	0.44	0.0%	2.9%	26.5%	82.22
6	DURHAM	558	33	6.8	5.45	0.52	6.1%	12.1%	30.3%	63.90
6	FAYETTEVILLE NC	565	14	10.4	2.29	0.29	7.1%	7.1%	28.6%	101.00
6	HAMPTON	590	62	12.9	9.21	0.89	8.1%	21.0%	40.3%	55.28
6	RICHMOND	652	2	9.0	1.00	0.50	0.0%	0.0%	50.0%	110.00
6	SALEM	658	130	9.2	13.74	0.59	0.8%	7.7%	53.1%	90.61
6	SALISBURY	659	72	43.5	0.94	0.08	4.2%	4.2%	8.3%	53.00
7	ATLANTA	508	54	8.2	3.33	0.39	3.7%	7.4%	25.9%	69.57
7	AUGUSTA	509	82	19.2	6.16	0.46	2.4%	3.7%	32.9%	91.04
7	CENTRAL ALABAMA VETERANS HCS †	619	66	10.8	7.50	0.62	9.1%	12.1%	42.4%	69.21
7	CHARLESTON	534	9	4.4	1.89	0.33	11.1%	11.1%	33.3%	63.00
7	COLUMBIA SC	544	23	6.3	1.74	0.17	0.0%	0.0%	17.4%	127.00
7	TUSCALOOSA	679	16	26.8	4.81	0.38	0.0%	0.0%	31.3%	94.20

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2000-March 31, 2001), by VAMC. †*

<i>V/ISN</i>	<i>STATION</i>	<i>CODE</i>	<i>Number of Unique Patients w PTSD Dx.</i>	<i>Average Length Of Stay (Index stay)</i>	<i>Bed Days 6 months After DC</i>	<i>Number of Admissions 6 months After D/C</i>	<i>% Readm. within 14 d ays</i>	<i>% Readm. within 30 days</i>	<i>% Readm. within 180 days</i>	<i>Days to Readm. First Year After D/C</i>
8	BAY PINES	516	34	5.1	2.41	0.38	5.9%	8.8%	17.6%	35.83
8	MIAMI	546	7	8.3	5.00	0.29	0.0%	0.0%	14.3%	77.00
8	NO. FLORIDA/SO. GEORGIA VETERANS HS †	573	24	4.0	0.46	0.21	0.0%	4.2%	12.5%	75.67
8	SAN JUAN	672	15	9.5	0.67	0.13	0.0%	0.0%	13.3%	77.50
8	TAMPA	673	15	5.9	2.73	0.33	0.0%	0.0%	26.7%	79.25
8	W PALM BEACH	548	33	7.8	4.91	0.85	15.2%	18.2%	48.5%	51.06
9	LEXINGTON	596	9	6.6	0.33	0.11	0.0%	0.0%	11.1%	142.00
9	LOUISVILLE	603	9	5.7	0.44	0.11	11.1%	11.1%	11.1%	9.00
9	MEMPHIS	614	35	10.5	6.37	0.71	11.4%	20.0%	40.0%	45.29
9	MIDDLE TENNESSEE HCS: MURFREESBORO	622	2	5.0	33.50	1.00	0.0%	0.0%	0.0%	NA
9	MIDDLE TENNESSEE HCS: NASHVILLE	626	50	13.8	4.94	0.46	4.0%	8.0%	26.0%	66.00
9	MOUNTAIN HOME	621	30	7.6	5.90	0.63	6.7%	16.7%	33.3%	46.60
10	CHILLICOTHE	538	31	11.2	3.55	0.48	3.2%	3.2%	25.8%	83.88
10	CINCINNATI	539	10	7.4	3.70	0.50	0.0%	10.0%	30.0%	59.67
10	CLEVELAND	541	12	6.6	3.33	0.33	0.0%	0.0%	16.7%	69.50
10	DAYTON	552	16	7.8	3.50	0.25	0.0%	0.0%	18.8%	114.00
11	ALLEN PARK	553	8	4.9	5.13	0.63	12.5%	37.5%	50.0%	36.75
11	ANN ARBOR HCS	506	7	10.7	8.86	1.00	28.6%	28.6%	42.9%	52.67
11	BATTLE CREEK	515	32	16.3	3.59	0.38	9.4%	9.4%	25.0%	71.88
11	DANVILLE, IL	550	4	15.5	3.75	0.75	0.0%	0.0%	50.0%	97.00
11	INDIANAPOLIS	583	7	8.0	0.00	0.00	0.0%	0.0%	0.0%	NA
11	NORTHERN INDIANA HCS †	610	16	12.8	7.56	0.56	6.3%	6.3%	25.0%	79.00
12	CHICAGO HCS †	537	41	20.6	8.73	0.54	0.0%	14.6%	36.6%	69.07
12	HINES	578	14	7.9	6.14	0.43	0.0%	7.1%	35.7%	66.20
12	MADISON	607	5	10.0	0.40	0.20	20.0%	20.0%	20.0%	5.00
12	MILWAUKEE	695	14	7.3	6.43	0.86	14.3%	14.3%	28.6%	36.50
12	NORTH CHICAGO	556	6	29.3	7.67	0.50	16.7%	16.7%	33.3%	71.50
12	TOMAH	676	7	12.6	0.00	0.00	0.0%	0.0%	0.0%	NA
13	BLACK HILLS HCS †	568	7	8.3	8.14	1.14	0.0%	14.3%	57.1%	111.75
13	FARGO	437	2	11.5	13.00	1.50	50.0%	100.0%	100.0%	16.50
13	MINNEAPOLIS	618	14	6.6	1.21	0.29	0.0%	7.1%	28.6%	63.00
13	SIOUX FALLS	438	2	7.5	3.00	0.50	0.0%	0.0%	50.0%	72.00
13	ST CLOUD	656	2	1.0	0.00	0.00	0.0%	0.0%	0.0%	NA
14	CENTRAL IOWA HCS	555	5	4.4	1.40	0.60	0.0%	20.0%	40.0%	42.00
14	IOWA CITY	584	8	5.4	0.75	0.13	0.0%	0.0%	12.5%	37.00
14	NEBRASKA-WESTERN IOWA HCS †	636	2	2.5	5.00	0.50	0.0%	0.0%	50.0%	35.00

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2000-March 31, 2001), by VAMC. †*

<i>V/ISN</i>	<i>STATION</i>	<i>CODE</i>	<i>Number of Unique Patients w PTSD Dx.</i>	<i>Average Length Of Stay (Index stay)</i>	<i>Bed Days 6 months After DC</i>	<i>Number of Admissions 6 months After D/C</i>	<i>% Readm. within 14 d ays</i>	<i>% Readm. within 30 days</i>	<i>% Readm. within 180 days</i>	<i>Days to Readm. First Year After D/C</i>
15	COLUMBIA MO	543	16	9.4	1.06	0.13	0.0%	0.0%	12.5%	154.50
15	EASTERN KANSAS HCS †	677	99	50.2	4.20	0.37	4.0%	7.1%	23.2%	78.30
15	HEARTLAND-EAST HCS†	657	47	7.6	6.23	0.68	4.3%	10.6%	36.2%	67.12
15	HEARTLAND-WEST HCS†	589	8	11.3	8.50	1.00	25.0%	37.5%	50.0%	39.25
15	MARION IL	609	9	7.1	0.89	0.22	0.0%	0.0%	22.2%	107.00
16	ALEXANDRIA	502	8	36.4	7.75	0.25	12.5%	12.5%	12.5%	1.00
16	CENTRAL ARKANSAS VET. HCS (No. Little Rock)	598	14	13.7	5.43	0.36	7.1%	7.1%	35.7%	62.60
16	FAYETTEVILLE AR	564	14	6.8	0.79	0.21	0.0%	0.0%	21.4%	97.33
16	GULF COAST HCS (Biloxi)	520	8	18.8	6.88	0.63	0.0%	0.0%	37.5%	52.33
16	HOUSTON	580	13	7.8	6.08	0.15	0.0%	0.0%	15.4%	112.50
16	JACKSON	586	13	13.4	3.77	0.15	0.0%	0.0%	15.4%	115.50
16	NEW ORLEANS	629	14	6.1	6.36	0.64	7.1%	7.1%	28.6%	90.00
16	OKLAHOMA CITY	635	15	7.7	0.47	0.07	0.0%	6.7%	6.7%	26.00
16	SHREVEPORT	667	1	8.0	0.00	0.00	0.0%	0.0%	0.0%	NA
17	CENTRAL TEXAS VETERANS HCS †	674	90	39.0	4.73	0.21	2.2%	3.3%	16.7%	72.13
17	NORTH TEXAS HCS †	549	27	6.4	2.11	0.22	0.0%	3.7%	7.4%	38.00
17	SOUTH TEXAS VETERANS HCS †	671	79	10.0	7.22	0.56	5.1%	11.4%	40.5%	74.88
18	NEW MEXICO HCS (Albuquerque)	501	18	4.6	1.44	0.39	5.6%	11.1%	22.2%	57.25
18	PHOENIX	644	34	6.8	4.56	0.62	5.9%	8.8%	38.2%	83.62
18	SOUTHERN ARIZONA HCS (Tucson)	678	13	5.4	0.00	0.00	0.0%	0.0%	0.0%	NA
18	WEST TEXAS HCS (Big Spring)	519	6	11.7	3.17	0.33	0.0%	16.7%	33.3%	90.50
19	DENVER	554	128	7.8	2.85	0.29	3.1%	4.7%	18.0%	67.96
19	GRAND JUNCTION	575	11	8.8	2.00	0.18	9.1%	9.1%	18.2%	50.00
19	MONTANA HCS †	436	6	6.7	10.83	0.83	16.7%	33.3%	50.0%	28.33
19	SALT LAKE CITY	660	14	8.3	6.36	0.50	0.0%	7.1%	28.6%	68.50
19	SHERIDAN	666	16	11.1	3.31	0.31	0.0%	6.3%	31.3%	91.40
20	BOISE	531	31	18.1	7.06	0.65	12.9%	12.9%	38.7%	48.67
20	PORTLAND	648	20	6.6	2.90	0.35	5.0%	15.0%	20.0%	48.50
20	PUGET SOUND HCS †	663	171	12.2	2.22	0.25	1.8%	4.1%	20.5%	74.09
20	ROSEBURG HCS	653	98	20.2	4.52	0.23	3.1%	5.1%	21.4%	81.52
20	SPOKANE	668	14	6.1	4.00	0.50	0.0%	0.0%	21.4%	60.33
20	WALLA WALLA	687	8	3.4	2.88	0.25	0.0%	0.0%	25.0%	72.00
21	CENTRAL CALIFORNIA HCS (Fresno)	570	10	4.1	0.80	0.30	0.0%	0.0%	30.0%	97.00
21	HONOLULU	459	11	6.9	1.91	0.36	0.0%	9.1%	27.3%	80.33
21	PALO ALTO HCS †	640	28	15.4	1.93	0.21	0.0%	3.6%	21.4%	68.17
21	SAN FRANCISCO	662	9	16.0	18.89	0.56	11.1%	22.2%	44.4%	32.50
21	SIERRA NEVADA HCS (Reno)	654	8	9.9	3.75	0.38	0.0%	0.0%	25.0%	84.00

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2000-March 31, 2001), by VAMC. †*

<i>V/ISN</i>	<i>STATION</i>	<i>CODE</i>	<i>Number of Unique Patients w PTSD Dx.</i>	<i>Average Length Of Stay (Index stay)</i>	<i>Bed Days 6 months After DC</i>	<i>Number of Admissions 6 months After D/C</i>	<i>% Readm. within 14 d ays</i>	<i>% Readm. within 30 days</i>	<i>% Readm. within 180 days</i>	<i>Days to Readm. First Year After D/C</i>
22	GREATER LOS ANGELES HCS †	691	25	10.2	7.84	1.04	12.0%	20.0%	36.0%	42.44
22	LOMA LINDA	605	12	3.7	0.25	0.08	0.0%	0.0%	8.3%	32.00
22	LONG BEACH HCS	600	9	6.1	5.67	0.67	0.0%	0.0%	44.4%	133.50
22	SAN DIEGO HCS	664	7	10.0	3.14	0.29	14.3%	14.3%	14.3%	2.00
22	SOUTHERN NEVADA HCS (Las Vegas)	593	8	6.0	3.38	0.50	0.0%	25.0%	50.0%	92.00
ALL VA			2992	14.5	5.21	0.42	4.0%	8.0%	29.0%	75.09
AVERAGE			26	11.2	4.93	0.42	4.5%	8.5%	27.4%	65.20
SD			32	8.4	5.91	0.27	7.2%	12.1%	15.9%	34.41
CV			1.25	0.75	1.20	0.65	1.61	1.43	0.58	0.53

NA = Not Applicable.

* Outlined values are 1 standard deviation from the mean and reflect high levels of inpatient service use.

† Data not comparable to previous reports due to consolidation.

Table 16. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2000-March 31, 2001.*

VISN	Any Psych. Outpatient Visit in 6 mos. After DC	Any Psych. Outpatient Visit in 30 Days After DC	Days to 1st OP Visit in 6 mos. After DC	Number of Visits in 6 mos. Among those w anyVisits	Continuity: Bi-months with 2 Visits	Dually Diagnosed: Psychiatric & SA Disorders	Any SA Outpatient Visit in 30 Days After DC	Number of SA OP Visits Among those w anyVisits	Outpatient Summary Score Average Z Score
1	89.5%	69.7%	23.32	15.21	2.44	39.0%	11.9%	16.14	-0.23
2	93.2%	81.8%	13.71	22.71	2.61	45.5%	11.4%	24.90	0.90
3	89.5%	60.5%	27.68	20.78	2.34	65.1%	27.9%	24.63	-0.06
4	87.9%	58.8%	31.19	15.34	2.36	49.1%	14.5%	19.57	-0.71
5	93.8%	77.5%	19.27	18.88	2.56	48.8%	15.0%	57.77	1.01
6	85.6%	57.3%	34.76	11.90	2.35	30.3%	6.9%	13.95	-1.26
7	91.2%	65.2%	26.38	15.98	2.48	38.0%	16.0%	21.06	-0.08
8	92.2%	64.8%	28.13	12.97	2.41	47.7%	20.3%	6.73	-0.32
9	94.1%	73.3%	27.28	9.69	2.49	25.9%	8.1%	23.75	-0.12
10	94.2%	68.1%	26.15	16.94	2.45	58.0%	18.8%	33.40	0.29
11	95.9%	77.0%	20.65	15.85	2.46	47.3%	21.6%	11.39	0.47
12	85.1%	66.7%	26.54	28.51	2.33	67.8%	31.0%	37.73	0.29
13	96.3%	77.8%	27.46	32.00	2.56	29.6%	14.8%	9.43	0.66
14	93.3%	60.0%	38.71	22.93	2.40	53.3%	13.3%	3.40	-0.61
15	91.6%	69.3%	25.48	14.88	2.46	55.9%	16.2%	35.38	0.15
16	91.0%	70.0%	22.93	9.66	2.29	43.0%	12.0%	11.16	-0.55
17	85.7%	63.3%	29.89	11.02	2.47	24.0%	10.2%	18.83	-0.72
18	95.8%	69.0%	28.28	8.25	2.30	40.8%	9.9%	5.11	-0.64
19	95.4%	85.7%	12.77	26.23	2.62	44.6%	18.3%	26.02	1.36
20	90.4%	67.5%	29.19	11.18	2.39	45.3%	16.1%	15.23	-0.44
21	92.4%	72.7%	22.07	17.00	2.48	48.5%	19.7%	13.65	0.25
22	93.4%	70.5%	22.11	18.30	2.54	54.1%	11.5%	30.92	0.36
All VA	90.5%	67.8%	26.34	15.24	2.43	42.6%	14.6%	21.30	0.00
Avg.	91.7%	69.4%	25.6	17.1	2.45	45.5%	15.7%	20.9	0.00
S.D.	3.4%	7.4%	6.0	6.3	0.10	11.5%	6.0%	12.7	0.65
C.V.	0.04	0.11	0.23	0.37	0.04	0.25	0.38	0.61	

* Outlined values are 1 s.d. from the mean of all VAMCs and reflect low outpatient service use after discharge from inpatient treatment.

Table 16A. Deviation of outpatient continuity of care from that of the median VISN over the first six months of treatment in FY 2001, among patients with PTSD (ICD-9 code 309.81), by VISN, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.).

VISN	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)
VISN Median	15.53	10.82	2.62	4.07	0.12	0.53	0.81	2.38	
VA National Avg.	15.76	11.85	2.62	4.16	0.12	0.57	0.81	2.76	
1	1.12	1.69	0.03	0.19	0.00	0.10 X	0.03	-0.02	0.74
2	2.77	2.01	0.08	0.33	-0.01	0.08 X	0.04	0.20	1.05
3	4.37	4.09	0.11	0.38	-0.02	0.15 X	0.07	-0.25	1.91
4	-3.51 X	-1.94 X	0.01	-0.05	0.00	0.07		-0.17	-0.27
5	0.45	0.76	-0.05 X	-0.12 X	0.04 X	0.09 X	0.02	-0.02	-0.35
6	-3.36 X	-1.72 X	-0.04 X	-0.25 X	0.01	0.09	0.00	-0.28	-0.62
7		-0.18	-0.04 X	-0.16 X	0.00	-0.02	-0.06 X	0.36	-0.76
8	-2.88 X	-1.61 X	-0.01	-0.11 X	0.00	0.06	-0.01	-0.15	-0.45
9	-3.73 X	-2.49 X	-0.03 X	-0.22 X	-0.01	0.00	-0.07 X		-1.02
10	1.96	0.89	0.00	0.03	0.01	-0.01	-0.04 X	0.53	-0.27
11	0.04	0.21	-0.02		0.01	-0.03	-0.06 X	0.59	-0.59
12	6.53	3.26	0.03	0.18	0.00	0.06 X	0.02	0.27	0.89
13	7.48	1.21	-0.02	-0.07	0.00	-0.03	-0.04 X	0.72	-0.07
14	5.00	1.89	0.09	0.15	-0.04	0.05 X	0.02	0.19	1.16
15	1.49	1.25	0.04	0.09	-0.01	0.03 X	-0.01 X	0.18	0.35
16	-1.63 X	-1.14 X	-0.07 X	-0.25 X			-0.06 X	0.08	-0.98
17	-1.91 X	-0.48	-0.02	-0.04	0.02 X	0.06 X	-0.01 X	-0.14	-0.41
18	-3.59 X	-1.45 X		-0.02	0.01 X	0.00 X	-0.04 X	0.05	-0.73
19	-1.16 X		0.01	0.12	0.02 X	0.07 X	0.02	-0.09	0.02
20	-1.87 X	-0.17	0.05	0.15	0.01	0.11 X	0.03	-0.13	0.35
21	-1.71 X	-0.42	0.00	0.02	0.03 X	0.08	0.01	-0.19	-0.28
22	0.89	1.70	0.01	0.04	0.02 X	0.07	0.01	0.05	0.14

X = Significantly different ($p < .05$) from median VISN in the undesired direction, after adjustment for differences in patient characteristics, distance of residence from VA, diagnosis, etc.

Table 16B. Outpatient continuity of care over the first six months of treatment in FY 2001 among patients with PTSD (ICD-9 code 309.81), by VISN.

VISN	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
1	6,078	16.23	13.08	2.64	2.64	0.11	0.64	0.85	2.59
2	2,693	19.53	14.19	2.70	2.70	0.11	0.60	0.85	2.99
3	4,307	20.30	15.98	2.72	2.72	0.10	0.68	0.89	2.40
4	4,828	10.79	8.91	2.62	2.62	0.12	0.60	0.81	2.40
5	2,017	20.68	15.22	2.59	2.59	0.16	0.58	0.83	3.07
6	3,886	10.23	8.73	2.54	2.54	0.14	0.63	0.81	2.22
7	6,239	15.53	11.44	2.56	2.56	0.12	0.50	0.75	3.06
8	5,876	11.22	9.10	2.61	2.61	0.12	0.60	0.81	2.41
9	3,608	8.69	7.19	2.55	2.55	0.12	0.55	0.74	2.38
10	3,182	20.15	13.89	2.61	2.61	0.14	0.49	0.77	3.48
11	2,280	14.41	11.09	2.57	2.57	0.14	0.50	0.75	3.18
12	2,709	25.75	17.02	2.67	2.67	0.12	0.55	0.83	3.32
13	2,043	25.96	14.34	2.65	2.65	0.10	0.46	0.77	3.80
14	851	18.97	12.51	2.69	2.69	0.08	0.59	0.83	2.74
15	3,445	14.63	11.38	2.62	2.62	0.11	0.58	0.81	2.65
16	7,154	13.04	9.92	2.53	2.53	0.12	0.53	0.76	2.68
17	3,591	11.69	10.08	2.58	2.58	0.14	0.60	0.81	2.34
18	3,778	10.95	9.50	2.62	2.62	0.13	0.53	0.78	2.65
19	2,961	13.09	10.82	2.62	2.62	0.14	0.60	0.83	2.49
20	5,842	13.74	11.34	2.66	2.66	0.14	0.62	0.84	2.60
21	4,460	14.22	11.27	2.60	2.60	0.16	0.61	0.83	2.52
22	4,081	16.99	13.60	2.63	2.63	0.14	0.59	0.82	2.79
ALL VA	85,909	14.91	11.49	2.61	2.61	0.13	0.58	0.81	2.70
Avg.	3,905	15.76	11.85	2.62	2.62	0.12	0.57	0.81	2.76
S.D.	1,595	4.80	2.57	0.05	0.05	0.02	0.05	0.04	0.41
C.V	0.41	0.30	0.22	0.02	0.02	0.16	0.10	0.05	0.15

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2000-March 31, 2001). †*

VISN	STATION	Any Psych. Outpatient Visit in 6 mos. After DC	Any Psych. Outpatient Visit in 30 Days After DC	Days to 1st OP Visit in 6 mos. After DC	Number of Visits in 6 mos. Among those w anyVisits	Continuity: Bi-months with 2 Visits	Dually Diagnosed: PTSD and SA Disorder	Any SA Outpatient Visit in 30 days After DC	Number of SA OP Visits in 6 mos. Among those w anyVisits
1	BEDFORD	75.0%	75.0%	7.7	12.3	1.8	50.0%	0.0%	
1	BOSTON HCS †	89.7%	71.8%	21.3	18.0	2.3	64.1%	28.2%	15.8
1	CONNECTICUT HCS †	94.7%	84.2%	13.3	27.4	2.3	57.9%	36.8%	25.0
1	NORTHAMPTON	88.0%	64.9%	26.5	12.1	2.5	34.6%	6.8%	13.5
1	PROVIDENCE	100.0%	92.9%	14.5	17.0	2.5	64.3%	14.3%	28.3
1	TOGUS	100.0%	75.0%	23.3	41.8	2.5	0.0%	25.0%	7.0
1	WHITE RIVER JCT	91.3%	78.3%	17.7	19.1	2.7	8.3%	4.3%	2.2
2	ALBANY	100.0%	91.7%	10.6	11.5	2.9	33.3%	0.0%	119.0
2	SYRACUSE	91.7%	91.7%	8.8	28.5	2.5	41.7%	25.0%	8.2
2	WESTERN NEW YORK HCS †	94.4%	72.2%	19.4	28.1	2.7	55.6%	11.1%	22.3
3	BRONX	90.0%	60.0%	38.7	7.0	2.1	60.0%	20.0%	1.5
3	CANANDAIGUA	50.0%	50.0%	8.0	3.0	1.0	50.0%	0.0%	
3	HUDSON VALLEY HCS †	94.7%	63.2%	28.4	20.8	2.6	63.2%	52.6%	22.2
3	NEW JERSEY HCS †	96.8%	64.5%	27.9	22.9	2.4	61.3%	22.6%	27.1
3	NEW YORK HARBOR HCS †	70.6%	52.9%	18.7	17.7	2.1	70.6%	17.6%	37.1
3	NORTHPORT	88.9%	55.6%	26.5	33.0	2.3	77.8%	22.2%	9.0
4	CLARKSBURG	95.0%	65.0%	29.1	7.6	2.4	15.0%	2.5%	1.8
4	COATESVILLE	87.5%	37.5%	49.1	16.4	2.4	68.8%	6.3%	24.5
4	LEBANON	100.0%	80.0%	22.4	11.6	2.8	40.0%	0.0%	
4	PHILADELPHIA	82.1%	61.5%	24.8	24.6	2.4	64.1%	12.8%	28.3
4	PITTSBURGH HCS †	87.0%	65.2%	26.7	15.1	2.3	54.3%	32.6%	14.1
4	WILKES BARRE	66.7%	33.3%	34.0	13.5	1.7	33.3%	33.3%	25.0
5	MARTINSBURG	90.9%	86.4%	11.5	14.8	2.5	50.0%	18.2%	30.5
5	MARYLAND HCS †	96.7%	70.0%	24.8	25.0	2.7	46.7%	10.0%	34.7
5	WASHINGTON	92.9%	78.6%	19.2	15.2	2.4	50.0%	17.9%	88.0
6	ASHEVILLE	94.1%	50.0%	42.4	6.4	2.4	35.3%	2.9%	9.5
6	DURHAM	75.8%	51.5%	37.3	5.2	2.0	57.6%	6.1%	2.8
6	FAYETTEVILLE NC	57.1%	28.6%	43.1	6.8	1.8	57.1%	14.3%	40.0
6	HAMPTON	82.3%	54.8%	37.8	19.7	2.3	77.4%	12.9%	20.4
6	RICHMOND	50.0%	50.0%	3.0	3.0	2.0	100.0%	0.0%	1.0
6	SALEM	88.5%	56.2%	36.6	7.9	2.4	6.2%	4.6%	13.5
6	SALISBURY	90.3%	73.6%	23.8	18.9	2.5	11.1%	6.9%	4.9
7	ATLANTA	88.9%	66.7%	19.5	18.3	2.5	51.9%	27.8%	29.5

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2000-March 31, 2001). †*

VISN	STATION	Any Psych. Outpatient Visit in 6 mos. After DC	Any Psych. Outpatient Visit in 30 Days After DC	Days to 1st OP Visit in 6 mos. After DC	Number of Visits in 6 mos. Among those w anyVisits	Continuity: Bi-months with 2 Visits	Dually Diagnosed: PTSD and SA Disorder	Any SA Outpatient Visit in 30 days After DC	Number of SA OP Visits in 6 mos. Among those w anyVisits
7	AUGUSTA	90.2%	58.5%	31.2	19.0	2.4	28.0%	7.3%	28.7
7	CENTRAL ALABAMA VETERANS HCS †	89.4%	62.1%	30.8	12.4	2.5	31.8%	18.2%	11.6
7	CHARLESTON	88.9%	77.8%	18.0	15.4	2.4	44.4%	0.0%	1.0
7	COLUMBIA SC	100.0%	78.3%	22.7	12.3	2.7	34.8%	8.7%	9.5
7	TUSCALOOSA	100.0%	81.3%	17.9	13.8	2.4	68.8%	31.3%	12.2
8	BAY PINES	94.1%	55.9%	39.2	15.9	2.5	55.9%	47.1%	6.5
8	MIAMI	85.7%	57.1%	34.3	12.2	2.3	57.1%	14.3%	12.0
8	NO. FLORIDA/SO. GEORGIA VETERANS HS †	100.0%	87.5%	18.5	8.5	2.8	16.7%	0.0%	2.5
8	SAN JUAN	86.7%	40.0%	45.1	4.1	2.3	46.7%	20.0%	9.4
8	TAMPA	93.3%	80.0%	15.3	7.1	2.3	53.3%	6.7%	3.3
8	W PALM BEACH	87.9%	63.6%	21.2	20.4	2.2	57.6%	15.2%	6.9
9	LEXINGTON	100.0%	55.6%	36.2	9.0	2.9	22.2%	0.0%	
9	LOUISVILLE	100.0%	66.7%	34.4	5.0	2.8	0.0%	11.1%	51.0
9	MEMPHIS	91.4%	77.1%	19.2	18.6	2.5	17.1%	2.9%	23.3
9	MIDDLE TENNESSEE HCS: MURFREESBORO †	100.0%	50.0%	44.5	8.5	2.0	100.0%	50.0%	39.0
9	MIDDLE TENNESSEE HCS: NASHVILLE †	94.0%	78.0%	26.3	7.4	2.4	40.0%	16.0%	19.7
9	MOUNTAIN HOME	93.3%	70.0%	31.8	5.1	2.4	16.7%	0.0%	20.0
10	CHILLICOTHE	96.8%	67.7%	33.2	12.6	2.6	58.1%	22.6%	14.1
10	CINCINNATI	90.0%	70.0%	18.3	11.0	2.6	80.0%	20.0%	44.8
10	CLEVELAND	91.7%	58.3%	17.9	15.6	2.3	41.7%	16.7%	61.0
10	DAYTON	93.8%	75.0%	22.7	30.1	2.2	56.3%	12.5%	44.8
11	ANN ARBOR HCS	100.0%	85.7%	17.1	26.7	2.4	57.1%	42.9%	16.0
11	BATTLE CREEK	93.8%	62.5%	26.6	12.5	2.4	53.1%	18.8%	4.9
11	DANVILLE IL	100.0%	75.0%	20.3	17.3	3.0	50.0%	25.0%	11.0
11	DETROIT VAMC	87.5%	75.0%	23.6	10.6	2.5	50.0%	37.5%	4.3
11	INDIANAPOLIS	100.0%	85.7%	13.3	21.3	1.7	28.6%	14.3%	32.0
11	NORTHERN INDIANA HCS †	100.0%	100.0%	13.1	16.9	2.8	37.5%	12.5%	33.3

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2000-March 31, 2001). †*

VISN	STATION	Any Psych. Outpatient Visit in 6 mos. After DC	Any Psych. Outpatient Visit in 30 Days After DC	Days to 1st OP Visit in 6 mos. After DC	Number of Visits in 6 mos. Among those w anyVisits	Continuity: Bi-months with 2 Visits	Dually Diagnosed: PTSD and SA Disorder	Any SA Outpatient Visit in 30 days After DC	Number of SA OP Visits in 6 mos. Among those w anyVisits
12	CHICAGO HCS †	85.4%	65.9%	31.9	22.2	2.3	80.5%	39.0%	46.6
12	HINES	85.7%	64.3%	27.1	44.8	2.0	85.7%	42.9%	37.4
12	MADISON	80.0%	80.0%	17.3	4.5	2.6	80.0%	40.0%	11.7
12	MILWAUKEE	78.6%	64.3%	18.6	22.8	2.6	50.0%	14.3%	24.8
12	NORTH CHICAGO	100.0%	66.7%	28.0	30.7	2.3	16.7%	0.0%	
12	TOMAH	85.7%	71.4%	13.3	57.0	2.3	28.6%	14.3%	1.0
13	BLACK HILLS HCS †	100.0%	57.1%	54.6	12.4	2.4	42.9%	42.9%	10.5
13	FARGO	100.0%	50.0%	70.0	43.0	2.5	0.0%	0.0%	
13	MINNEAPOLIS	100.0%	92.9%	12.1	36.6	2.7	28.6%	7.1%	3.0
13	SIOUX FALLS	100.0%	100.0%	10.5	58.0	3.0	0.0%	0.0%	
13	ST CLOUD	50.0%	50.0%	2.0	30.0	1.5	50.0%	0.0%	
14	CENTRAL IOWA HCS †	100.0%	80.0%	18.8	33.2	3.0	40.0%	20.0%	10.0
14	IOWA CITY	87.5%	50.0%	53.1	21.4	2.1	62.5%	12.5%	2.0
14	NEBRASKA-WESTERN IOWA HCS †	100.0%	50.0%	38.0	2.5	2.0	50.0%	0.0%	1.0
15	COLUMBIA MO	93.8%	43.8%	47.8	8.4	2.3	43.8%	6.3%	16.0
15	EASTERN KANSAS HCS †	92.9%	73.7%	23.7	17.0	2.5	58.6%	11.1%	25.0
15	HEARTLAND-EAST HCS†	87.2%	68.1%	23.9	13.9	2.3	53.2%	29.8%	51.4
15	HEARTLAND-WEST HCS †	100.0%	87.5%	10.8	17.9	2.8	50.0%	25.0%	21.3
15	MARION IL	88.9%	55.6%	26.6	4.8	2.7	66.7%	11.1%	32.0
16	ALEXANDRIA	100.0%	75.0%	18.6	6.4	2.9	37.5%	0.0%	
16	CENTRAL ARKANSAS VET. HCS (No.Little Rock)	92.9%	71.4%	28.7	11.2	2.4	64.3%	14.3%	34.0
16	FAYETTEVILLE AR	100.0%	71.4%	24.9	5.7	2.5	28.6%	7.1%	1.5
16	GULF COAST HCS (Biloxi)	100.0%	62.5%	33.8	14.9	2.4	75.0%	12.5%	1.0
16	HOUSTON	84.6%	69.2%	17.9	14.9	2.3	46.2%	15.4%	14.0
16	JACKSON	84.6%	84.6%	9.5	6.6	2.2	23.1%	0.0%	2.0
16	NEW ORLEANS	100.0%	78.6%	22.5	13.0	2.6	42.9%	21.4%	11.5
16	OKLAHOMA CITY	73.3%	46.7%	29.5	5.5	1.6	40.0%	20.0%	6.7
16	SHREVEPORT	100.0%	100.0%	5.0	4.0	1.0	0.0%	0.0%	
17	CENTRAL TEXAS HCS †	84.4%	52.2%	35.6	9.8	2.5	16.7%	14.4%	16.5
17	NORTH TEXAS HCS †	88.9%	81.5%	18.7	14.1	2.4	37.0%	18.5%	33.1
17	SOUTH TEXAS VETERANS HCS†	86.1%	69.6%	27.4	11.3	2.5	27.8%	2.5%	12.3

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2000-March 31, 2001). †*

VISN	STATION	Any Psych. Outpatient Visit in 6 mos. After DC	Any Psych. Outpatient Visit in 30 Days After DC	Days to 1st OP Visit in 6 mos. After DC	Number of Visits in 6 mos. Among those w anyVisits	Continuity: Bi-months with 2 Visits	Dually Diagnosed: PTSD and SA Disorder	Any SA Outpatient Visit in 30 days After DC	Number of SA OP Visits in 6 mos. Among those w anyVisits
18	NEW MEXICO HCS (Albuquerque)	94.4%	66.7%	36.0	10.6	2.2	83.3%	38.9%	2.4
18	PHOENIX	94.1%	67.6%	25.9	7.7	2.3	23.5%	0.0%	
18	SOUTHERN ARIZONA HCS (Tucson)	100.0%	69.2%	27.5	6.8	2.3	38.5%	0.0%	
18	WEST TEXAS HCS (Big Spring)	100.0%	83.3%	21.0	7.3	2.7	16.7%	0.0%	14.5
19	DENVER	96.1%	89.8%	9.3	28.0	2.6	43.8%	19.5%	28.7
19	GRAND JUNCTION	100.0%	100.0%	7.0	32.0	2.9	18.2%	18.2%	13.0
19	MONTANA HCS †	100.0%	83.3%	30.5	12.7	2.5	0.0%	0.0%	
19	SALT LAKE CITY HCS	92.9%	71.4%	22.9	25.7	2.6	64.3%	28.6%	15.0
19	SHERIDAN	87.5%	56.3%	30.8	12.7	2.6	68.8%	6.3%	15.5
20	BOISE	96.8%	64.5%	36.3	7.4	2.5	29.0%	35.5%	9.5
20	PORTLAND	85.0%	75.0%	16.9	10.2	2.5	40.0%	5.0%	24.5
20	PUGET SOUND HCS †	87.1%	62.0%	32.7	13.5	2.4	55.0%	19.9%	18.8
20	ROSEBURG HCS	93.9%	73.5%	25.6	9.3	2.3	32.7%	8.2%	2.2
20	SPOKANE	92.9%	78.6%	13.6	11.7	2.5	64.3%	0.0%	6.0
20	WALLA WALLA	100.0%	87.5%	30.3	5.3	2.5	37.5%	12.5%	22.0
21	CENTRAL CALIFORNIA HCS (Fresno)	90.0%	50.0%	46.7	3.1	2.1	70.0%	10.0%	33.5
21	HONOLULU	90.9%	81.8%	11.9	48.6	2.6	27.3%	9.1%	2.3
21	PALO ALTO HCS †	96.4%	75.0%	21.4	11.6	2.6	50.0%	10.7%	5.8
21	SAN FRANCISCO	77.8%	66.7%	13.9	14.6	2.1	55.6%	33.3%	34.5
21	SIERRA NEVADA HCS (Reno)	100.0%	87.5%	16.5	13.4	2.8	37.5%	62.5%	10.0
22	GREATER LOS ANGELES HCS †	100.0%	72.0%	24.2	17.9	2.6	68.0%	12.0%	7.8
22	LOMA LINDA	91.7%	66.7%	16.5	29.4	2.7	25.0%	8.3%	51.0
22	LONG BEACH HCS	100.0%	77.8%	25.3	17.9	2.8	66.7%	33.3%	68.3
22	SAN DIEGO HCS	85.7%	71.4%	25.3	10.0	2.3	71.4%	0.0%	7.0
22	SOUTHERN NEVADA HCS (Las Vegas)	75.0%	62.5%	15.7	8.5	2.3	25.0%	0.0%	1.0
ALL VA		90.5%	67.8%	26.3	15.2	2.4	42.6%	14.6%	21.3
AVERAGE		90.8%	69.1%	24.8	16.3	2.4	45.3%	15.4%	19.9
SD		10.4%	14.4%	11.5	10.9	0.3	21.8%	13.8%	19.0
CV		0.11	0.21	0.5	0.7	0.1	48.2%	89.6%	1.0

* Outlined values are 1 s.d. from the mean of all VAMCs and reflect low outpatient service delivery.

† Data not comparable to previous reports due to consolidation.

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2001, among patients with PTSD (ICD-9 code 309.81), by Station, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.). ‡

VISN	Station	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)
Median: VAMC		11.94	9.95	2.66	4.03	0.12	0.69	0.81	2.47	
VA National Avg.		14.59	11.12	2.60	4.10	0.13	0.58	0.81	2.67	
1	BEDFORD	10.63	7.55	-0.01	0.18	0.01	-0.15 X	0.00	1.07	0.40
1	BOSTON HCS ‡	2.05	1.86	0.04	0.17	0.01	0.00	0.07	-0.25	0.43
1	CONNECTICUT HCS ‡	3.09	3.05	0.09	0.37	-0.04	0.00	0.07	-0.20	0.73
1	MANCHESTER	-0.81	-0.33	-0.02	0.10	0.00	-0.08 X	0.01	0.01	-0.04
1	NORTHAMPTON	1.09	1.17	-0.02	-0.01	0.00	-0.13 X	-0.03 X	0.11	-0.13
1	PROVIDENCE	2.33	2.80	0.02	0.12	0.02	-0.08 X	0.00	0.14	0.15
1	TOGUS	1.97	0.15	-0.07 X	-0.24 X	0.03	-0.09 X	0.00	0.18	-0.20
1	WHITE RIVER JCT	-0.19	0.17	0.05	0.05	-0.04	-0.03	0.05	0.10	0.32
2	ALBANY	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.10
2	BATH	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.10
2	CANANDAIGUA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.10
2	SYRACUSE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.10
2	WESTERN NEW YORK HCS ‡	3.97	2.31	0.07	0.27	0.00	-0.07 X	0.04	0.23	0.40
3	BRONX	9.45	6.34	0.11	0.59	-0.02	-0.01	0.08	-0.05	1.05
3	HUDSON VALLEY HCS ‡	7.34	5.79	0.14	0.54	-0.03	0.01	0.10	-0.29	1.08
3	NEW JERSEY HCS ‡	1.91	1.50	0.03	0.03	-0.01	-0.03	0.04	-0.12	0.31
3	NEW YORK HARBOR HCS ‡	5.79	4.41	0.10	0.36	-0.01	-0.02	0.08	-0.22	0.78
3	NORTHPORT	6.03	5.72	0.14	0.23	-0.03	0.06	0.09	-0.46	1.03
4	ALTOONA	1.73	1.65	0.07	0.25	-0.03	-0.10 X	0.05	-0.09	0.37
4	BUTLER	0.91	-0.55	0.00	-0.04	-0.04	-0.13 X	0.01	0.23	-0.01
4	CLARKSBURG	-2.15 X	-1.99 X	0.01	-0.38 X	0.02	-0.05		-0.10	-0.22
4	COATESVILLE	0.41	1.01	0.06	0.35	-0.01	-0.05	0.05	-0.27	0.35
4	ERIE	-1.80	-1.53	0.02	-0.14	0.01	-0.11 X	-0.02		-0.24
4	LEBANON	-2.24	-1.73 X	-0.07	-0.30 X	0.01	-0.06 X	0.03	-0.24	-0.21
4	PHILADELPHIA	-5.67 X	-4.13 X	-0.05	-0.14	0.03	-0.04	0.02	-0.49	-0.35
4	PITTSBURGH HCS ‡	-0.84	-0.12	0.06	0.06	-0.01	-0.17 X	-0.04 X	0.36	-0.17
4	WILKES BARRE	-2.27	-1.70 X	-0.01	-0.23 X	-0.03	-0.16 X	-0.05 X	-0.05	-0.36
4	WILMINGTON	-3.77 X	-3.53 X	-0.05	-0.57 X	0.01	-0.02	0.03	-0.50	-0.31
5	MARTINSBURG	-5.20 X	-3.80 X	-0.11 X	-0.59 X	0.01	0.08	0.08	-0.72	-0.15
5	MARYLAND HCS ‡	3.11	2.92	-0.05	0.00	0.06	-0.07 X	0.02	0.15	0.02
5	WASHINGTON	5.52	3.30	-0.04	0.02	0.06	-0.15 X	-0.02	0.42	-0.11
6	ASHEVILLE	-0.59	-0.40	0.01	-0.02	-0.04	-0.08 X	0.00	-0.15	0.05
6	BECKLEY	-4.26 X	-3.56 X	0.04	-0.38 X	-0.08 X	-0.04	0.03	-0.40	0.00
6	DURHAM	-4.69 X	-3.07 X	-0.20 X	-0.65 X	0.09	-0.04	-0.01	-0.45	-0.81
6	FAYETTEVILLE NC	-2.75 X	-1.74 X	-0.08 X	-0.40 X	0.07	-0.07 X	-0.01	-0.17	-0.51
6	HAMPTON	1.79	2.08	-0.01	-0.01	0.03	-0.11 X	0.00	-0.02	-0.04
6	RICHMOND	-2.35	-1.32	-0.08 X	-0.32 X	0.00	0.03	0.06	-0.42	-0.02
6	SALEM	-1.32	-1.14	-0.05	-0.28 X	-0.01	-0.09 X	-0.01	-0.11	-0.26
6	SALISBURY	-1.85	-1.18	0.01	-0.19 X	0.00	-0.04	0.02	-0.27	-0.04

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2001, among patients with PTSD (ICD-9 code 309.81), by Station, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.). ‡

VISN	Station	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)
Median: VAMC		11.94	9.95	2.66	4.03	0.12	0.69	0.81	2.47	
VA National Avg.		14.59	11.12	2.60	4.10	0.13	0.58	0.81	2.67	
7	ATLANTA	-1.95 X	-1.41 X	-0.06 X	-0.25 X	0.03	-0.13 X	-0.03 X	0.00	-0.46
7	AUGUSTA	13.38	7.60	-0.01	0.05	0.01	-0.13 X	0.02	0.55	0.50
7	BIRMINGHAM	-0.52	-0.89	-0.04	-0.22 X	0.00	-0.19 X	-0.09 X	0.28	-0.53
7	CENTRAL ALABAMA VETERANS HCS ‡	-1.68	-0.79	-0.07 X	-0.23 X	-0.01	-0.22 X	-0.14 X	0.35	-0.73
7	CHARLESTON	-1.88	-1.64 X	-0.02	-0.02	-0.01	-0.10 X	-0.01	-0.10	-0.19
7	COLUMBIA SC	0.76	0.15	-0.02	-0.09	-0.01	-0.20 X	-0.08 X	0.48	-0.38
7	DUBLIN	5.66	0.13	-0.05	-0.20 X	0.01	-0.09 X	0.04	0.45	0.06
7	TUSCALOOSA	2.86	2.10	-0.10 X	-0.35 X	-0.01	-0.28 X	-0.13 X	1.35	-0.64
8	BAY PINES	-1.21	-1.48 X	-0.09 X	-0.44 X	0.00	-0.09 X	-0.02	0.04	-0.39
8	MIAMI	-2.58 X	-1.23	-0.02	0.01	0.03	-0.08 X	0.00	-0.20	-0.22
8	NO. FLORIDA/SO. GEORGIA VETERANS HS ‡	-1.92 X	-1.48 X	-0.05 X	-0.27 X	0.02	-0.08 X	0.00	-0.25	-0.30
8	SAN JUAN	-5.69	-3.04	-0.37	-1.07	0.27	0.27	0.16	-1.11	-0.68
8	TAMPA	-1.42	-1.16	0.01	-0.12	0.00	-0.10 X	0.00	-0.07	-0.15
8	W PALM BEACH	-0.60	-0.36	0.06	0.15	-0.01	-0.10 X	0.00	-0.07	0.02
9	HUNTINGTON	-2.88 X	-2.36 X	-0.05	-0.37 X	-0.02	-0.30 X	-0.22 X	0.43	-1.11
9	LEXINGTON	1.15	-0.31	0.01		-0.02	-0.02	0.03	-0.24	0.20
9	LOUISVILLE	-3.32 X	-2.59 X	0.02	-0.18	0.00	-0.20 X	-0.08 X	0.13	-0.58
9	MEMPHIS	-3.32 X	-1.98 X	-0.03	-0.22 X	0.01	-0.12 X	-0.01	0.02	-0.38
9	MIDDLE TENNESSEE HCS ‡	-2.38 X	-2.01 X	-0.06 X	-0.33 X	-0.02	-0.11 X	-0.02 X	-0.11	-0.37
9	MOUNTAIN HOME	-2.05	-1.51 X	-0.04	-0.19 X	-0.01	-0.16 X	-0.06 X	0.03	-0.45
10	CHILLICOTHE	2.78	0.90	-0.01	-0.41 X	-0.01	-0.28 X	-0.18 X	0.54	-0.70
10	CINCINNATI	2.62	3.06	0.01	0.16	0.04	-0.10 X	0.00	0.43	0.07
10	CLEVELAND	3.39	0.76	0.00	0.09	0.01	-0.17 X	-0.01	0.70	-0.07
10	COLUMBUS	-0.78	-0.81	0.06	-0.01	-0.02	-0.09 X	0.02	0.06	0.04
10	DAYTON	7.19	2.67	-0.10 X	-0.11	0.03	-0.17 X	-0.07 X	0.72	-0.26
11	ALLEN PARK	0.40	1.61	-0.05	-0.07	0.03	-0.12 X	-0.03	0.40	-0.22
11	ANN ARBOR HCS	3.48	1.49	-0.02	0.04	0.03	-0.13 X	0.00	0.42	-0.07
11	BATTLE CREEK	0.99		-0.07 X	-0.18 X	0.02	-0.36 X	-0.17 X	1.49	-0.97
11	DANVILLE, IL	0.43	-0.66	0.01	-0.08	-0.02	-0.08 X	0.01	-0.13	0.01
11	INDIANAPOLIS	5.46	4.49	0.07	0.36	0.00	-0.15 X	-0.01	0.83	0.32
11	NORTHERN INDIANA HCS ‡	1.75	0.46	-0.04	-0.03	0.03	-0.17 X	-0.03 X	0.53	-0.29
11	SAGINAW	-2.13	-1.22	0.00	-0.03	-0.02	-0.14 X	-0.03	0.17	-0.24
12	CHICAGO HCS ‡	13.61	7.01	0.04	0.26	0.01	-0.08 X	0.05	0.39	0.75
12	HINES	8.05	4.03	0.07	0.20	0.02	-0.08 X	0.05	0.31	0.50
12	IRON MOUNTAIN	4.60	2.66	0.02	0.32	0.02	-0.12 X	0.01	0.34	0.21
12	MADISON	-2.73	-2.36 X	0.03	-0.02	-0.01	-0.11 X	-0.02	-0.06	-0.20
12	MILWAUKEE	3.69	2.51	0.08	0.23	-0.04	-0.03	0.05	-0.13	0.56
12	NORTH CHICAGO	9.81	4.03	-0.02	0.09	0.02	-0.12 X	0.03	0.67	0.30
12	TOMAH	10.43	3.72	-0.09 X	-0.13	0.01	-0.18 X	-0.03 X	0.73	-0.02

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Median: VAMC		11.94	9.95	2.66	4.03	0.12	0.69	0.81	2.47	
VA National Avg.		14.59	11.12	2.60	4.10	0.13	0.58	0.81	2.67	
13	BLACK HILLS HCS ‡	15.17	6.88	0.05	0.17	0.00	-0.12 X	0.03	0.93	0.69
13	FARGO	-1.71	-2.38	0.00	-0.26	0.06	-0.21 X	-0.10 X	0.42	-0.77
13	MINNEAPOLIS	6.18	0.46		-0.04	0.00	-0.18 X	-0.04 X	0.58	-0.11
13	SIOUX FALLS	1.33	0.40	0.08	-0.02	-0.06	-0.02	0.05	-0.26	0.45
13	ST CLOUD	14.05	2.29	-0.12 X	-0.26 X	0.00	-0.26 X	-0.10 X	1.37	-0.28
14	CENTRAL IOWA HCS ‡	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.10
14	IOWA CITY	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.10
14	NEBRASKA-WESTERN IOWA HCS ‡	6.43	2.39	0.09	0.11	-0.04	-0.10 X	0.02	0.23	0.45
15	COLUMBIA MO	-1.05	-1.64	-0.06	-0.26 X	0.01	-0.12 X	-0.02	0.04	-0.36
15	EASTERN KANSAS HCS ‡	11.08	7.70	0.04	0.28	-0.01	-0.13 X	0.02	0.58	0.63
15	KANSAS CITY	0.64	0.64	0.04	0.10	0.00	-0.02	0.05	-0.27	0.27
15	MARION IL	-2.03	-1.84 X	0.02	-0.11	-0.03	-0.16 X	-0.07 X	-0.05	-0.35
15	POPLAR BLUFF	-1.44	-1.31	0.11	0.09	-0.06	-0.21 X	-0.07 X	0.11	-0.18
15	ST LOUIS	5.56	3.27	0.05	0.10	-0.01	-0.05	0.04	0.25	0.47
15	WICHITA	2.94	2.15	0.05	0.15	0.00	-0.20 X	-0.02	0.86	-0.02
16	ALEXANDRIA	-0.44	0.43	0.01	0.23	-0.06	-0.11 X	-0.04 X	0.20	0.05
16	CENTRAL ARKANSAS VET. HCS (No. Little Rock)	0.12	0.39	-0.02	-0.35 X	-0.04	-0.22 X	-0.11 X	0.55	-0.48
16	FAYETTEVILLE AR	-1.15	-1.47 X	-0.12 X	-0.48 X	-0.02	-0.25 X	-0.12 X	0.26	-0.85
16	GULF COAST HCS (Biloxi)	-3.17 X	-2.43 X	-0.13 X	-0.54 X	0.00	-0.17 X	-0.07 X	-0.07	-0.77
16	HOUSTON	2.22	0.87	-0.05	-0.26 X	-0.01	-0.12 X	-0.03 X	0.25	-0.18
16	JACKSON	-4.54 X	-2.95 X	0.04	0.00	-0.01	-0.10 X	-0.02	-0.12	-0.25
16	MUSKOGEE	-2.81 X	-2.27 X	-0.12 X	-0.43 X	0.03	-0.14 X	-0.06 X	-0.05	-0.71
16	NEW ORLEANS	-0.06	1.12	0.01	0.26	0.01	-0.12 X	0.00	-0.05	0.01
16	OKLAHOMA CITY	14.56	2.65	-0.16 X	-0.32 X	0.04	-0.09 X	0.02	0.38	0.10
16	SHREVEPORT	-1.30	-0.60	-0.20 X	-0.36 X	0.10	-0.12 X	-0.03 X	-0.03	-0.74
17	CENTRAL TEXAS VETERANS HCS ‡		0.61	0.00	0.12	0.03	-0.11 X	-0.03 X	0.06	-0.13
17	NORTH TEXAS HCS ‡	-0.25	0.16	-0.04	-0.09	0.03	-0.12 X	-0.03 X	-0.03	-0.26
17	SOUTH TEXAS VETERANS HCS ‡	-1.06	-0.53	-0.02	-0.18 X	0.02	-0.05	0.03	-0.29	-0.08
18	AMARILLO	-1.75	-1.22	-0.07	-0.25 X	0.01	-0.21 X	-0.10 X	0.08	-0.68
18	EL PASO HCS	1.09	2.04	0.07	0.28	0.01	-0.02	0.05	-0.38	0.40
18	NEW MEXICO HCS (Albuquerque)	-3.67 X	-1.44 X	0.02	0.05	0.02	-0.17 X	-0.04 X	0.32	-0.41
18	NORTHERN ARIZONA HCS (Prescott)	-0.64	-0.18	-0.03	-0.14			0.04	-0.42	0.10
18	PHOENIX	-2.47 X	-1.86 X	-0.05 X	-0.20 X	0.02	-0.20 X	-0.05 X	0.15	-0.61
18	SOUTHERN ARIZONA (Tucson)	0.19	0.77	0.09	0.08	0.00	-0.07 X	0.02	-0.07	0.17
18	WEST TEXAS HCS (Big Spring)	-3.66	-2.82 X	-0.25 X	-0.69 X	0.07	-0.21 X	-0.15 X	-0.03	-1.36

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Median: VAMC		11.94	9.95	2.66	4.03	0.12	0.69	0.81	2.47	
VA National Avg.		14.59	11.12	2.60	4.10	0.13	0.58	0.81	2.67	
19	CHEYENNE	-1.17	-0.65	-0.06	-0.07	0.04	0.01	0.07	-0.35	0.05
19	DENVER	1.66	1.55	0.01	0.08	0.03	-0.09 X	0.02	0.15	0.07
19	GRAND JUNCTION	-0.10	-0.20	-0.10 X	-0.13	-0.03	-0.16 X	-0.06 X	0.13	-0.37
19	MONTANA HCS ‡	-2.09	-1.02	-0.10 X	-0.17	0.04	-0.05	-0.02	-0.44	-0.35
19	SALT LAKE CITY	0.90	1.30	0.03	0.16	0.02	-0.10 X	0.03	0.04	0.12
19	SHERIDAN	1.49	1.56	0.06	0.28	0.00	-0.15 X	-0.03	0.30	0.04
19	SOUTHERN COLORADO HCS	0.24	0.38	0.07	0.30	0.01	-0.07 X	0.05	-0.23	0.24
20	ALASKA HCS & RO (Anchorage)	28.76	26.75	0.84	3.55	-0.19 X	0.03	0.26	0.55	4.64
20	BOISE	-2.33	-0.44	0.08	0.12	0.01	0.03	0.07	-0.57	0.31
20	PORTLAND	-2.06 X	-0.33	0.08	0.13	-0.02	0.04	0.08	-0.67	0.45
20	PUGET SOUND HCS ‡	1.71	1.50	0.06	0.25	0.02	-0.10 X	0.02	0.37	0.19
20	ROSEBURG HCS	1.23	1.61	0.04	0.16	0.02	-0.07 X	0.01	-0.01	0.13
20	SPOKANE	-3.15 X	-1.25	-0.08 X	-0.27 X	0.06	-0.02	0.03	-0.49	-0.27
20	WALLA WALLA	-3.05 X	-1.94 X	0.01	-0.22 X	0.06	0.00	0.04	-0.30	-0.14
20	WHITE CITY	-2.92 X	-0.47	0.06	0.18	0.02	-0.05	0.03	-0.22	0.09
21	CENTRAL CALIFORNIA HCS (Fresno)	5.91	0.45	0.00	-0.30 X	0.01	-0.01	0.04	-0.38	0.23
21	HONOLULU	33.92	30.76	0.90	3.96	-0.15 X	0.08	0.33	0.80	5.24
21	MANILA	-4.53	-3.69	0.12	-0.33	0.58	0.26	0.18	-1.06	-0.59
21	NORTHERN CALIFORNIA HCS ‡	-4.62 X	-2.92 X	-0.11 X	-0.35 X	0.08	-0.08 X	-0.02 X	-0.42	-0.69
21	PALO ALTO HCS ‡	-1.72	-0.53	0.02	0.12	0.01	-0.14 X	-0.02	0.02	-0.20
21	SAN FRANCISCO	4.23	3.15	0.05	0.17	0.00	-0.02	0.07	-0.01	0.52
21	SIERRA NEVADA HCS (Reno)	-4.10 X	-0.38	0.00	-0.03	0.04	-0.11 X	-0.04 X	-0.16	-0.38
22	GREATER LOS ANGELES HCS ‡	5.89	4.62	0.01	0.14	0.03	-0.05 X	0.04	0.12	0.39
22	LOMA LINDA	-1.46	-0.66	0.00	-0.15	-0.01	-0.11 X	-0.03 X	0.07	-0.23
22	LONG BEACH HCS	1.20	1.61	0.00	-0.04	0.01	-0.08 X	0.00	-0.04	0.04
22	SAN DIEGO HCS	0.68	1.25	0.00	-0.04	0.03	-0.11 X	0.00	0.17	-0.09
22	SOUTHERN NEVADA HCS (Las Vegas)	-2.18	-0.98	-0.06	-0.26 X	0.03	-0.08 X	-0.01	-0.10	-0.35

X = Significantly different (p<.05) from median VISN in the undesired direction, after adjustment for differences in patient characteristics, distance of residence from VA, diagnosis, etc.

‡ Data not comparable to previous reports dues to consolidation.

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2001, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
1	BEDFORD	340	29.46	21.33	2.65	4.56	0.12	0.50	0.81	4.23
1	BOSTON HCS ‡	1874	17.34	13.98	2.68	4.45	0.12	0.68	0.89	2.38
1	CONNECTICUT HCS ‡	958	20.26	15.97	2.74	4.68	0.07	0.66	0.89	2.69
1	MANCHESTER	461	10.50	9.30	2.61	4.26	0.10	0.62	0.83	2.35
1	NORTHAMPTON	542	12.50	10.78	2.59	4.12	0.12	0.57	0.79	2.48
1	PROVIDENCE	716	13.95	12.60	2.62	4.27	0.14	0.62	0.81	2.51
1	TOGUS	705	13.60	9.70	2.52	3.84	0.14	0.62	0.82	2.54
1	WHITE RIVER JCT	482	11.45	9.86	2.64	4.18	0.09	0.67	0.86	2.53
2	ALBANY	847	18.81	13.49	2.71	4.62	0.13	0.65	0.87	2.73
2	BATH	254	23.81	16.44	2.80	4.56	0.05	0.46	0.78	4.22
2	CANANDAIGUA	462	23.20	17.32	2.60	4.40	0.16	0.53	0.82	3.31
2	SYRACUSE	405	15.25	11.53	2.72	4.50	0.09	0.62	0.85	2.71
2	WESTERN NEW YORK HCS ‡	725	18.93	13.71	2.69	4.42	0.10	0.63	0.88	2.81
3	BRONX	422	23.36	17.62	2.72	4.78	0.10	0.67	0.90	2.50
3	HUDSON VALLEY HCS ‡	607	26.45	19.81	2.76	4.74	0.10	0.67	0.91	2.66
3	NEW JERSEY HCS ‡	1101	14.45	11.81	2.63	4.16	0.11	0.68	0.86	2.30
3	NEW YORK HARBOR HCS ‡	1522	20.86	16.33	2.73	4.59	0.10	0.67	0.89	2.42
3	NORTHPORT	655	21.17	17.58	2.79	4.53	0.07	0.74	0.91	2.23
4	ALTOONA	136	11.87	10.33	2.65	4.30	0.11	0.59	0.85	2.21
4	BUTLER	114	17.43	11.79	2.67	4.25	0.07	0.54	0.82	3.06
4	CLARKSBURG	670	7.64	6.50	2.61	3.67	0.13	0.66	0.81	2.14
4	COATESVILLE	660	13.06	11.17	2.63	4.40	0.12	0.65	0.86	2.21
4	ERIE	118	10.86	8.79	2.64	4.07	0.13	0.57	0.79	2.47
4	LEBANON	488	8.91	7.70	2.52	3.73	0.13	0.65	0.85	2.08
4	PHILADELPHIA	1045	10.96	8.59	2.61	4.19	0.14	0.61	0.83	2.39
4	PITTSBURGH HCS ‡	950	13.21	10.94	2.68	4.27	0.10	0.51	0.77	3.00
4	WILKES BARRE	412	8.22	7.40	2.61	3.90	0.07	0.54	0.76	2.27
4	WILMINGTON	235	7.43	5.66	2.56	3.52	0.12	0.67	0.84	1.88
5	MARTINSBURG	572	9.42	7.62	2.47	3.51	0.14	0.77	0.89	1.88
5	MARYLAND HCS ‡	586	21.22	16.39	2.60	4.31	0.17	0.58	0.83	3.12
5	WASHINGTON	859	27.80	19.47	2.65	4.54	0.17	0.45	0.79	3.83
6	ASHEVILLE	532	7.77	7.21	2.57	3.93	0.09	0.66	0.81	1.90
6	BECKLEY	296	5.57	4.99	2.63	3.67	0.04	0.67	0.85	1.82
6	DURHAM	595	7.76	6.87	2.41	3.46	0.22	0.65	0.80	2.10
6	FAYETTEVILLE NC	353	9.25	7.84	2.51	3.67	0.18	0.62	0.79	2.31
6	HAMPTON	622	17.53	14.29	2.59	4.14	0.16	0.56	0.81	2.74
6	RICHMOND	363	11.63	9.81	2.53	3.87	0.11	0.70	0.86	2.21
6	SALEM	465	10.86	8.80	2.58	3.91	0.10	0.57	0.78	2.43
6	SALISBURY	660	8.96	7.91	2.56	3.82	0.13	0.66	0.83	2.06

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2001, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
7	ATLANTA	1110	18.20	13.11	2.63	4.18	0.13	0.48	0.77	3.29
7	AUGUSTA	669	27.14	18.53	2.60	4.21	0.14	0.54	0.82	3.15
7	BIRMINGHAM	848	11.85	9.30	2.56	3.93	0.13	0.52	0.74	2.70
7	CENTRAL ALABAMA VETERANS HCS ‡	636	11.20	9.56	2.51	3.81	0.12	0.46	0.66	2.86
7	CHARLESTON	520	9.32	7.78	2.56	4.04	0.12	0.61	0.81	2.24
7	COLUMBIA SC	1237	11.80	9.43	2.57	3.97	0.11	0.50	0.73	2.81
7	DUBLIN	471	16.96	9.37	2.50	3.75	0.14	0.61	0.84	2.84
7	TUSCALOOSA	748	18.64	13.85	2.53	3.88	0.11	0.34	0.66	4.30
8	BAY PINES	1173	13.16	9.80	2.56	3.82	0.11	0.56	0.78	2.81
8	MIAMI	705	13.59	11.30	2.62	4.31	0.15	0.59	0.81	2.56
8	NO. FLORIDA/SO. GEORGIA VETERANS HS ‡	1288	10.45	8.47	2.56	3.85	0.13	0.61	0.80	2.24
8	SAN JUAN	448	7.40	6.77	2.71	3.83	0.06	0.68	0.85	2.02
8	TAMPA	1541	10.00	8.41	2.61	4.01	0.12	0.59	0.81	2.30
8	W PALM BEACH	721	12.08	9.84	2.67	4.30	0.11	0.59	0.81	2.43
9	HUNTINGTON	697	5.85	5.39	2.50	3.57	0.12	0.41	0.58	2.62
9	LEXINGTON	547	11.84	8.51	2.59	4.03	0.11	0.69	0.84	2.04
9	LOUISVILLE	462	8.72	7.25	2.62	3.95	0.12	0.50	0.73	2.54
9	MEMPHIS	395	11.46	9.30	2.61	3.97	0.12	0.54	0.79	2.82
9	MIDDLE TENNESSEE HCS ‡	906	8.37	7.01	2.54	3.74	0.10	0.59	0.79	2.20
9	MOUNTAIN HOME	601	7.76	6.91	2.53	3.81	0.12	0.55	0.76	2.27
10	CHILLICOTHE	481	14.45	10.60	2.56	3.64	0.13	0.39	0.62	3.06
10	CINCINNATI	589	23.32	17.85	2.68	4.57	0.16	0.52	0.81	3.71
10	CLEVELAND	1355	21.80	14.20	2.63	4.36	0.13	0.48	0.80	3.76
10	COLUMBUS	305	13.71	10.24	2.67	4.15	0.11	0.59	0.83	2.69
10	DAYTON	452	21.52	13.75	2.50	4.04	0.16	0.51	0.74	3.37
11	ANN ARBOR HCS	290	17.47	12.40	2.55	4.18	0.15	0.56	0.81	2.96
11	BATTLE CREEK	609	13.40	9.95	2.52	3.89	0.15	0.32	0.64	3.99
11	DANVILLE, IL	374	11.25	8.42	2.59	3.94	0.12	0.62	0.82	2.23
11	DETROIT VAMC	277	18.75	15.25	2.58	4.17	0.16	0.52	0.78	3.44
11	INDIANAPOLIS	259	18.98	15.38	2.68	4.58	0.11	0.53	0.80	3.44
11	NORTHERN INDIANA HCS ‡	278	12.49	9.59	2.55	4.02	0.17	0.53	0.78	2.82
11	SAGINAW	193	9.47	8.30	2.59	4.03	0.11	0.56	0.78	2.57
12	CHICAGO HCS ‡	750	39.16	24.81	2.72	4.76	0.13	0.50	0.85	4.06
12	HINES	318	25.94	17.46	2.73	4.54	0.12	0.57	0.86	3.29
12	IRON MOUNTAIN	138	20.59	13.70	2.61	4.46	0.16	0.53	0.81	3.04
12	MADISON	266	11.59	8.75	2.68	4.23	0.10	0.55	0.78	2.70
12	MILWAUKEE	502	17.64	13.78	2.71	4.44	0.07	0.64	0.86	2.58
12	NORTH CHICAGO	343	26.80	17.20	2.62	4.39	0.15	0.53	0.83	3.68
12	TOMAH	392	20.85	12.56	2.49	3.89	0.13	0.53	0.79	3.05

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2001, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
13	BLACK HILLS HCS ‡	365	31.99	19.18	2.68	4.42	0.12	0.51	0.83	4.00
13	FARGO	57	15.23	8.30	2.63	3.88	0.21	0.51	0.75	3.11
13	MINNEAPOLIS	873	20.43	11.84	2.66	4.26	0.10	0.49	0.77	3.28
13	SIOUX FALLS	170	11.25	8.74	2.65	3.97	0.06	0.69	0.86	2.03
13	ST CLOUD	578	35.88	17.31	2.61	4.27	0.09	0.32	0.69	5.05
14	CENTRAL IOWA HCS ‡	216	30.04	16.56	2.58	3.95	0.09	0.52	0.79	3.49
14	IOWA CITY	208	12.30	8.88	2.70	4.24	0.08	0.59	0.81	2.46
14	NEBRASKA-WESTERN IOWA HCS ‡	427	16.63	12.24	2.75	4.42	0.07	0.63	0.87	2.49
15	COLUMBIA MO	304	9.46	7.00	2.51	3.76	0.14	0.57	0.78	2.45
15	EASTERN KANSAS HCS ‡	760	25.63	18.83	2.65	4.46	0.11	0.53	0.83	3.35
15	KANSAS CITY	570	12.77	10.51	2.64	4.21	0.12	0.69	0.86	2.14
15	MARION IL	510	7.00	6.07	2.59	3.88	0.10	0.56	0.74	2.11
15	POPLAR BLUFF	400	7.91	6.71	2.67	4.03	0.08	0.50	0.74	2.32
15	ST LOUIS	491	15.79	12.28	2.61	4.12	0.12	0.66	0.85	2.55
15	WICHITA	410	15.33	12.09	2.66	4.26	0.12	0.49	0.79	3.33
16	ALEXANDRIA	150	11.75	10.37	2.61	4.35	0.06	0.58	0.76	2.73
16	CENTRAL ARKANSAS VET. HCS (No. Little Rock)	1001	13.11	10.82	2.57	3.73	0.09	0.47	0.70	3.11
16	FAYETTEVILLE AR	632	7.53	6.00	2.43	3.44	0.10	0.47	0.69	2.38
16	GULF COAST HCS (Biloxi)	1264	7.72	6.74	2.46	3.52	0.12	0.53	0.74	2.25
16	HOUSTON	963	16.15	11.93	2.58	3.95	0.11	0.55	0.78	2.88
16	JACKSON	424	9.53	7.78	2.67	4.20	0.10	0.55	0.77	2.71
16	MUSKOGEE	681	7.33	6.51	2.48	3.64	0.15	0.58	0.76	2.16
16	NEW ORLEANS	1203	18.05	14.48	2.63	4.51	0.13	0.52	0.81	3.00
16	OKLAHOMA CITY	468	29.60	13.79	2.46	3.83	0.15	0.59	0.83	3.07
16	SHREVEPORT	368	10.11	8.65	2.38	3.69	0.23	0.55	0.77	2.44
17	CENTRAL TEXAS VETERANS HCS ‡	997	11.94	10.52	2.60	4.23	0.14	0.58	0.78	2.49
17	NORTH TEXAS HCS ‡	1242	12.95	10.74	2.57	4.07	0.15	0.56	0.78	2.53
17	SOUTH TEXAS VETERANS HCS ‡	1352	10.35	9.15	2.59	3.95	0.13	0.66	0.85	2.04
18	AMARILLO	272	7.96	7.31	2.53	3.79	0.11	0.51	0.71	2.28
18	EL PASO HCS	432	13.14	12.00	2.69	4.44	0.12	0.68	0.87	2.03
18	NEW MEXICO HCS (Albuquerque)	1280	12.25	10.55	2.67	4.32	0.12	0.47	0.75	3.23
18	NORTHERN ARIZONA HCS (Prescott)	172	11.65	9.51	2.57	3.91	0.12	0.69	0.85	2.10
18	PHOENIX	1075	9.68	8.15	2.56	3.96	0.13	0.50	0.76	2.58
18	SOUTHERN ARIZONA (Tucson)	442	11.11	9.86	2.67	4.11	0.13	0.63	0.82	2.27
18	WEST TEXAS HCS (Big Spring)	105	4.97	4.38	2.27	3.11	0.21	0.48	0.64	2.19

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2001, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
19	CHEYENNE	272	9.63	8.44	2.53	4.06	0.17	0.71	0.88	1.97
19	DENVER	740	18.34	14.21	2.65	4.34	0.14	0.57	0.83	3.04
19	FORT HARRISON	205	8.68	7.65	2.45	3.77	0.19	0.63	0.78	2.01
19	GRAND JUNCTION	185	10.66	8.88	2.49	3.96	0.10	0.53	0.75	2.49
19	SALT LAKE CITY HCS	686	13.52	11.35	2.66	4.34	0.13	0.58	0.84	2.63
19	SHERIDAN	134	12.95	10.72	2.62	4.25	0.13	0.53	0.77	2.81
19	SOUTHERN COLORADO HCS	739	10.59	9.17	2.65	4.33	0.13	0.63	0.86	2.06
20	ALASKA HCS & RO (Anchorage)	174	8.55	7.79	2.60	4.02	0.13	0.66	0.83	2.01
20	BOISE	403	11.56	10.43	2.71	4.35	0.13	0.70	0.88	2.07
20	PORTLAND	1189	12.34	10.66	2.70	4.36	0.11	0.69	0.88	2.13
20	PUGET SOUND HCS ‡	2498	16.32	12.80	2.68	4.44	0.13	0.58	0.83	3.08
20	ROSEBURG HCS	636	12.53	11.03	2.62	4.25	0.15	0.62	0.81	2.39
20	SPOKANE	408	11.29	9.64	2.55	3.92	0.18	0.64	0.84	2.30
20	WALLA WALLA	248	8.04	6.94	2.56	3.71	0.19	0.69	0.84	2.11
20	WHITE CITY	286	14.39	11.78	2.66	4.28	0.15	0.59	0.83	2.86
21	CENTRAL CALIFORNIA HCS (Fresno)	295	18.84	10.79	2.60	3.81	0.13	0.69	0.86	2.06
21	HONOLULU	614	12.25	10.68	2.59	4.21	0.18	0.73	0.90	2.10
21	MANILA	43	4.70	4.60	2.44	3.51	0.56	0.90	0.93	1.16
21	NORTHERN CALIFORNIA HCS ‡	1284	13.37	10.40	2.54	3.96	0.19	0.56	0.79	2.59
21	PALO ALTO HCS ‡	1122	11.74	10.14	2.63	4.27	0.13	0.54	0.79	2.61
21	SAN FRANCISCO	887	18.82	14.44	2.67	4.35	0.12	0.66	0.88	2.69
21	SIERRA NEVADA HCS (Reno)	215	14.52	12.93	2.64	4.27	0.14	0.51	0.76	3.05
22	GREATER LOS ANGELES HCS ‡	1680	22.96	17.51	2.65	4.44	0.15	0.59	0.85	3.04
22	LOMA LINDA	755	12.36	10.20	2.64	4.06	0.10	0.56	0.78	2.70
22	LONG BEACH HCS	316	17.05	13.73	2.64	4.22	0.12	0.59	0.82	2.73
22	SAN DIEGO HCS	827	12.68	11.12	2.61	4.09	0.15	0.59	0.82	2.60
22	SOUTHERN NEVADA HCS (Las Vegas)	503	11.03	9.66	2.54	3.88	0.15	0.60	0.80	2.42
All VA		85,909	14.91	11.49	2.61	4.14	0.13	0.58	0.81	2.70
Avg.		614	14.59	11.12	2.60	4.10	0.13	0.58	0.81	2.67
S.D.		397	6.41	3.76	0.08	0.31	0.05	0.09	0.06	0.59
C.V.		0.65	0.44	0.34	0.03	0.08	0.38	0.15	0.07	0.22

‡ Data not comparable to previous reports dues to consolidation.

Table 18. Overall PTSD Performance Score, by VISN†.

<i>VISN</i>	<i>Inpatient Summary Score Average Z: Weighted# (Table 14)</i>	<i>Outpatient Summary Score Average Z: Weighted (Table 16)</i>	<i>Summary Continuity of Outpatient Care Average Z (Table 16A)</i>	<i>Total PTSD Summary Score Average Z: (+=desired)</i>	<i>Rank Order On Total PTSD Summary Score</i>
1	0.17	-0.23	0.74	0.23	8
2	-0.03	0.90	1.05	0.64	3
3	0.83	-0.06	1.91	0.90	1
4	0.14	-0.71	-0.27	-0.28	16
5	-1.09	1.01	-0.35	-0.14	11
6	0.61	-1.26	-0.62	-0.42	20
7	0.00	-0.08	-0.76	-0.28	17
8	-0.20	-0.32	-0.45	-0.32	18
9	0.66	-0.12	-1.02	-0.16	13
10	-0.75	0.29	-0.27	-0.25	15
11	0.47	0.47	-0.59	0.12	9
12	0.79	0.29	0.89	0.66	2
13	0.30	0.66	-0.07	0.30	6
14	-0.45	-0.61	1.16	0.03	10
15	0.57	0.15	0.35	0.36	4
16	-0.64	-0.55	-0.98	-0.72	22
17	0.13	-0.72	-0.41	-0.33	19
18	-0.57	-0.64	-0.73	-0.65	21
19	-0.59	1.36	0.02	0.26	7
20	-0.49	-0.44	0.35	-0.19	14
21	-0.40	0.25	-0.28	-0.14	12
22	0.53	0.36	0.14	0.34	5
Avg.	0.0	0.0	0.0	0.0	
S.D.	0.5	0.6	0.7	0.4	

Sign is reversed so that high scores reflect difference in the desired direction -- low inpatient utilization.

† Rankings only comparable to FY 1998 report.

Table 19. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2000 to March 31, 2001, by PTSD diagnosis and program type, by VISN†.

VISN	General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
	<i>Number of Unique Patients w PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients w. no PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients Any Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>
1	295	95.6%	1,585	98.8%	406	99.0%
2	44	95.5%	825	95.2%	0	NA
3	85	92.9%	1,422	95.1%	184	97.8%
4	165	84.2%	1,402	97.0%	107	94.4%
5	80	82.5%	998	94.1%	481	85.2%
6	347	76.7%	1,950	96.5%	280	97.9%
7	250	95.6%	1,590	96.7%	108	96.3%
8	124	99.2%	1,868	97.6%	0	NA
9	135	90.4%	1,649	91.7%	387	91.2%
10	69	98.6%	1,264	94.2%	326	96.0%
11	74	94.6%	1,434	95.7%	239	99.2%
12	87	100.0%	1,336	97.5%	460	99.1%
13	27	96.3%	728	96.3%	21	95.2%
14	15	93.3%	363	95.3%	52	96.2%
15	179	78.2%	1,525	93.6%	106	93.4%
16	100	97.0%	2,709	94.4%	7	100.0%
17	196	89.3%	1,428	94.3%	302	94.7%
18	71	97.2%	958	97.2%	208	89.4%
19	175	82.9%	740	96.8%	0	NA
20	342	89.8%	1,151	97.1%	366	99.2%
21	66	98.5%	1,091	96.6%	224	97.8%
22	61	100.0%	1,422	95.9%	134	97.0%
All VA	2,987	90.0%	29,438	96.0%	4,398	95.0%
Average	136	92.2%	1,338	95.8%	200	95.7%
S.D.	96	6.9%	483	1.6%	155	3.7%
C.V.	0.70	0.08	0.36	0.02	0.78	0.04

† Does not include PRRP and domiciliary care.

Table 20. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2000 to March 31, 2001, by PTSD diagnosis and program type, by VAMC†.

VISN		General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
		<i>Number of Unique Patients w PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients w. no PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients Any Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>
1	BEDFORD	4	100.0%	373	99.2%	0	0.0%
1	BOSTON	39	97.4%	443	98.6%	336	99.7%
1	CONNECTICUT HCS ‡	19	94.7%	207	97.6%	33	93.9%
1	NORTHAMPTON	191	94.8%	154	98.7%	0	0.0%
1	PROVIDENCE	14	100.0%	213	99.5%	0	0.0%
1	TOGUS	4	100.0%	82	97.6%	37	97.3%
1	WHITE RIVER JCT	24	95.8%	113	100.0%	0	0.0%
2	ALBANY	12	100.0%	175	89.7%	0	0.0%
2	CANANDAIGUA	2	50.0%	180	93.9%	0	0.0%
2	SYRACUSE	12	100.0%	128	96.9%	0	0.0%
2	WESTERN NEW YORK HCS ‡	18	94.4%	342	98.0%	0	0.0%
3	BRONX	9	100.0%	191	96.3%	0	0.0%
3	HUDSON VALLEY HCS ‡	19	78.9%	257	87.2%	0	0.0%
3	NEW JERSEY HCS ‡	31	93.5%	325	94.5%	1	100.0%
3	NEW YORK HARBOR HCS ‡	17	100.0%	445	97.8%	177	97.7%
3	NORTHPORT	9	100.0%	204	99.5%	6	100.0%
4	CLARKSBURG	40	60.0%	63	85.7%	7	42.9%
4	COATESVILLE	32	93.8%	206	95.6%	0	0.0%
4	LEBANON	5	100.0%	184	98.9%	0	0.0%
4	PHILADELPHIA	39	94.9%	350	97.1%	0	0.0%
4	PITTSBURGH HCS ‡	46	87.0%	473	98.1%	0	0.0%
4	WILKES BARRE	3	100.0%	126	97.6%	100	98.0%
5	MARTINSBURG	22	86.4%	157	94.9%	193	90.7%
5	MARYLAND HCS ‡	30	73.3%	479	92.7%	288	81.6%
5	WASHINGTON DC	28	89.3%	362	95.6%	0	0.0%
6	ASHEVILLE	34	88.2%	122	86.9%	0	0.0%
6	DURHAM	33	97.0%	300	98.0%	0	0.0%
6	FAYETTEVILLE NC	14	100.0%	200	97.5%	0	0.0%
6	HAMPTON	62	100.0%	387	98.7%	166	97.0%
6	RICHMOND	2	100.0%	253	97.2%	114	99.1%
6	SALEM	130	65.4%	240	94.2%	0	0.0%
6	SALISBURY	72	56.9%	448	96.7%	0	0.0%
7	ATLANTA	54	92.6%	363	97.5%	104	96.2%
7	AUGUSTA	82	98.8%	309	97.7%	4	100.0%
7	CENTRAL ALABAMA VETERANS HCS ‡	66	92.4%	358	95.3%	0	0.0%
7	CHARLESTON	9	100.0%	162	96.9%	0	0.0%
7	COLUMBIA SC	23	95.7%	180	98.3%	0	0.0%
7	TUSCALOOSA	16	100.0%	218	94.5%	0	0.0%
8	BAY PINES	34	97.1%	360	97.8%	0	0.0%
8	MIAMI	4	100.0%	102	94.1%	0	0.0%
8	NO. FLORIDA/SO. GEORGIA VETERANS HS ‡	24	100.0%	415	95.4%	0	0.0%
8	SAN JUAN	15	100.0%	304	99.7%	0	0.0%
8	TAMPA	15	100.0%	385	98.4%	0	0.0%

Table 20. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2000 to March 31, 2001, by PTSD diagnosis and program type, by VAMC†.

VISN		General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
		<i>Number of Unique Patients w PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients w. no PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients Any Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>
8	W PALM BEACH	32	100.0%	302	98.3%	0	0.0%
9	LEXINGTON	9	100.0%	228	94.7%	0	0.0%
9	LOUISVILLE	9	88.9%	271	95.2%	0	0.0%
9	MEMPHIS	35	80.0%	249	94.8%	227	93.8%
9	MIDDLE TENNESSEE HCS: MURFREESBORO ‡	2	100.0%	59	94.9%	0	0.0%
9	MIDDLE TENNESSEE HCS: NASHVILLE ‡	50	94.0%	634	90.1%	33	90.9%
9	MOUNTAIN HOME	30	93.3%	208	84.1%	127	86.6%
10	CHILLICOTHE	31	100.0%	407	91.2%	0	0.0%
10	CINCINNATI	10	100.0%	178	97.2%	55	92.7%
10	CLEVELAND	12	100.0%	480	94.8%	126	96.0%
10	DAYTON	16	93.8%	199	96.5%	145	97.2%
11	ALLEN PARK	8	87.5%	275	98.9%	239	99.2%
11	ANN ARBOR HCS	7	100.0%	180	98.3%	0	0.0%
11	BATTLE CREEK	32	96.9%	521	98.1%	0	0.0%
11	DANVILLE, IL	4	75.0%	181	84.0%	0	0.0%
11	INDIANAPOLIS	7	85.7%	127	95.3%	0	0.0%
11	NORTHERN INDIANA HCS ‡	16	100.0%	150	92.7%	0	0.0%
12	CHICAGO HCS ‡	41	100.0%	406	98.0%	0	0.0%
12	HINES	14	100.0%	234	97.9%	256	98.8%
12	MADISON	5	100.0%	129	99.2%	0	0.0%
12	MILWAUKEE	14	100.0%	247	99.6%	203	99.5%
12	NORTH CHICAGO	6	100.0%	177	97.7%	1	100.0%
12	TOMAH	7	100.0%	143	90.2%	0	0.0%
13	BLACK HILLS HCS ‡	7	85.7%	109	92.7%	0	0.0%
13	FARGO	2	100.0%	81	100.0%	0	0.0%
13	MINNEAPOLIS	14	100.0%	224	97.3%	0	0.0%
13	SIOUX FALLS	2	100.0%	55	92.7%	21	95.2%
13	ST CLOUD	2	100.0%	259	96.5%	0	0.0%
14	CENTRAL IOWA HCS†	5	80.0%	105	92.4%	0	0.0%
14	IOWA CITY	8	100.0%	115	93.9%	0	0.0%
14	NEBRASKA-WESTERN IOWA HCS ‡	2	100.0%	143	98.6%	52	96.2%
15	COLUMBIA MO	16	87.5%	127	95.3%	0	0.0%
15	EASTERN KANSAS HCS ‡	99	62.6%	449	93.1%	0	0.0%
15	KANSAS CITY	8	100.0%	306	93.1%	0	0.0%
15	MARION IL	9	100.0%	111	93.7%	0	0.0%
15	ST LOUIS	47	100.0%	532	93.8%	106	93.4%
16	ALEXANDRIA	8	100.0%	178	97.2%	0	0.0%
16	CENTRAL ARKANSAS VET. HCS (No. Little Rock)	14	100.0%	428	94.2%	1	100.0%
16	FAYETTEVILLE AR	14	92.9%	157	96.2%	0	0.0%
16	GULF COAST HCS (Biloxi)	8	100.0%	442	87.3%	0	0.0%
16	HOUSTON	13	92.3%	443	95.3%	6	100.0%
16	JACKSON	13	100.0%	240	94.2%	0	0.0%
16	NEW ORLEANS	14	100.0%	195	99.0%	0	0.0%

Table 20. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2000 to March 31, 2001, by PTSD diagnosis and program type, by VAMC†.

VISN		General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
		<i>Number of Unique Patients w PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients w. no PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients Any Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>
16	OKLAHOMA CITY	15	93.3%	393	96.4%	0	0.0%
16	SHREVEPORT	1	100.0%	233	95.7%	0	0.0%
17	CENTRAL TEXAS VETERANS HCS ‡	90	82.2%	495	93.5%	1	100.0%
17	NORTH TEXAS HCS ‡	27	85.2%	466	94.0%	0	0.0%
17	SOUTH TEXAS VETERANS HCS ‡	79	98.7%	467	95.5%	301	94.7%
18	NEW MEXICO HCS (Albuquerque)	18	100.0%	217	99.1%	0	0.0%
18	PHOENIX	34	97.1%	454	96.9%	0	0.0%
18	SOUTHERN ARIZONA (Tucson)	13	92.3%	197	97.5%	115	95.7%
18	WEST TEXAS HCS (Big Spring)	6	100.0%	90	93.3%	93	81.7%
19	DENVER	128	78.9%	292	97.3%	0	0.0%
19	GRAND JUNCTION	11	90.9%	78	94.9%	0	0.0%
19	MONTANA HCS ‡	6	100.0%	61	98.4%	0	0.0%
19	SALT LAKE CITY HCS	14	100.0%	205	99.0%	0	0.0%
19	SHERIDAN	16	87.5%	104	91.3%	0	0.0%
20	BOISE	31	80.6%	116	94.8%	1	100.0%
20	PORTLAND	20	95.0%	274	98.2%	135	100.0%
20	PUGET SOUND HCS ‡	171	97.1%	449	97.1%	192	99.0%
20	ROSEBURG HCS	98	76.5%	196	95.4%	0	0.0%
20	SPOKANE	14	100.0%	85	100.0%	0	0.0%
20	WALLA WALLA	8	100.0%	31	100.0%	38	97.4%
21	CENTRAL CALIFORNIA HCS (Fresno)	10	100.0%	151	94.7%	53	96.2%
21	HONOLULU	11	90.9%	113	98.2%	0	0.0%
21	PALO ALTO HCS ‡	28	100.0%	554	97.7%	171	98.2%
21	SAN FRANCISCO	9	100.0%	90	92.2%	0	0.0%
21	SIERRA NEVADA HCS (Reno)	8	100.0%	183	96.2%	0	0.0%
22	GREATER LOS ANGELES HCS ‡	25	100.0%	594	96.1%	0	0.0%
22	LOMA LINDA	12	100.0%	211	95.7%	0	0.0%
22	LONG BEACH HCS	9	100.0%	228	98.2%	0	0.0%
22	SAN DIEGO HCS	7	100.0%	238	94.5%	134	97.0%
22	SOUTHERN NEVADA HCS (Las Vegas)	8	100.0%	151	94.0%	0	0.0%
All VA		2,987	89.8%	29,438	95.7%	4,398	95.3%
Avg.		26	94.1%	254	95.7%	38	32.7%
S.D.		32	10.0%	138	3.3%	76	45.6%
C.V.		1.25	0.11	0.54	0.03	2.01	1.39

† Does not include PRRP and domiciliary care.

‡ Data not comparable to previous reports due to consolidation.

PART II: TREATMENT OF VETERANS BY SPECIALIZED PTSD OUTPATIENT TEAMS

Part II presents data on the clinical operation of the PTSD Clinical Team (PCT), Substance Use PTSD Team (SUPT) and Women's Stress Disorder Treatment Team (WSDTT) programs for FY 2001. The data presented in this chapter are derived from PTSD Status Forms (PSFs) that are completed by staff members for each veteran newly admitted to treatment by their specialized programs within FY 2001. A "newly admitted" veteran is defined as one who has not been in treatment with the particular specialized program in the past 12 months before this admission. This means that only one PSF per veteran per program within any 12-month period is kept in the dataset. "Treatment" is defined as more than one visit to the program for this episode of therapy. ¹

Throughout the presentation, variables assessing key aspects of the programs' specialized mission are designated as critical monitors. Other variables that are descriptive of the veteran population being served are presented to provide a more extensive picture. The data are evaluated at both the program and the VISN level. Programs that deviate by more than one standard deviation from the average for all programs are identified as outliers. In addition to comparing each individual program to the other programs, each VISN is compared to other VISNs.

Comprehensive Evaluation and Monitoring Procedures

VA's Northeast Program Evaluation Center (NEPEC), the Evaluation Division of the National Center for PTSD, monitors and evaluates the administrative and clinical operation of all of the specialized programs for PTSD. The patient-specific data presented in this section of the report were collected by clinicians whose primary responsibility was delivering clinical care rather than collecting data. Although some variation in administration and reporting is to be expected, several procedures were instituted to minimize this variation:

- a. *Manuals.* Detailed manuals were written describing the correct manner of administration of the questionnaire, the conventions for coding responses to ambiguous questions, and the recommended solutions to other common problems in data collection.
- b. *Individualized Training.* Each program designates two staff persons to serve as the local director and data manager of the monitoring protocol. Individualized training is given over the telephone to these staff persons for each new program that is added to the national network and to each new staff member of an existing program who has been designated as director or data manager.

¹ In Part III, data are presented for "New vets treated" as determined from the Stop Code data. "New vets treated" in Part III is defined as those veterans who have more than one visit recorded in the Austin Outpatient File within FY 2001 but no visits during the previous fiscal year. It should be noted that the definition of "new vets treated" in Part III is more stringent than the definition of "newly admitted" veterans in Part II. The definition of "treated" remains the same, that is, seen more than once.

c. *Data Reporting and Management.* Data managers enter the data that have been collected by clinicians electronically into the National Mental Health Data Base located at the Pittsburgh VA Medical Center at Highland Drive. Each month, NEPEC downloads these data from Pittsburgh and appends them to a master file. The new data are reviewed at NEPEC for errors and inconsistencies. When problems are identified, they are corrected through telephone calls or letters to the programs.

d. *Contact with the programs.* Feedback on the progress of data collection and discussion of systematic changes in the conduct of the evaluation take place during monthly conference calls in which all programs are invited to participate. Tables summarizing monthly data by program are distributed by mail and displayed on the VA Intranet.

Rationale of the Monitoring Protocol

Specialized treatment of PTSD is a relatively new clinical activity, requiring considerable freedom for clinical innovation. Evaluation efforts are based on the assumption that rigid regulations or performance standards are not appropriate for the programs in their current stages of development, and that premature standardization might stifle the creative evolution of new interventions or combinations of existing interventions that would prove to be particularly efficacious. At the same time, it is important to evaluate the programs as completely and objectively as possible.

Although absolute practice standards have not been established for the treatment of PTSD, statistical norms can be derived from the distribution of data across the individual programs. The distinction between statistical norms and formal practice standards is an important one. Practice standards are established by a consensus of professionals and codify how health care should be conducted. Statistical norms, in contrast, reflect how health care is practiced on average, without specifying exactly what is and what is not acceptable practice. Practice variation can be measured and statistical outliers can be identified. The identification of statistical outliers must not be confused with the identification of practice standard violations. Statistical outliers are extremes on a continuum and, as such, deserve attention. However, without further exploration of specific circumstances, no conclusions can be drawn regarding their exact meaning.

Monitoring Instrument

A three-page PTSD Status Form (PSF) is used to monitor the most salient characteristics of the veterans being treated by the outpatient specialized PTSD programs. The PSF includes the principal demographic, military, social adjustment, and diagnostic information from the War Stress Interview - Part 1 (WSI-1). The WSI-1 was one of the primary instruments that were used in earlier, more intensive studies of the implementation and outcomes of the specialized

outpatient PTSD programs. The PSF was revised a few years ago by the addition of two questions of special interest to VA leadership: evaluation of PTSD due to military sexual trauma and evaluation of PTSD due to military noncombat nonsexual trauma.

Critical Monitors for Outpatient Programs

Through the selection of critical monitors, we have sought to highlight those features of the operation of the programs that are most relevant to their specialized mission. Eight of the evaluation measures were selected as critical monitors for outpatient programs. The first five are characteristics of the population being served: war zone service, clinical diagnosis of PTSD, diagnosis of substance abuse, prior psychiatric treatment of any type, and prior specialized PTSD treatment in particular. Three critical monitors concern the performance of program staff: validation of war zone service by the DD214, number of veterans evaluated per FTEE, and the proportion of new veterans treated who were enrolled in the monitoring protocol. The directionality of these monitors that is in accordance with the programs' mission is **high** percentages of war zone service, diagnoses of PTSD and substance abuse, validation of war zone service by the DD214, number of veterans monitored per FTEE, and proportion of veterans who were seen who were monitored. **Low** percentages of veterans who had prior specialized PTSD treatment or psychiatric treatment of any type are in accordance with the programs' defined mission.

It must, once again, be emphasized that these monitors should not necessarily be considered, by themselves, to be indicators of the appropriateness of the administrative or clinical operation of particular programs. They can properly be used only to identify statistical outliers, the importance of which must be determined by follow-up discussions with the programs. Since any modification of administrative and/or clinical practices must take place at the level of the individual program, it is essential that an evaluation examine the data at both this level as well as at the VISN level.

Comparison of VISNs and Individual Programs on Critical Monitors

Outlier performance is indicated by any value that is 1 standard deviation from the mean of all VISNs or of all specialized programs, and is marked by a boxed cell. Outlier status for the VISNs as a whole is presented in Tables 2-1, 2-3 and 2-5. The particular individual programs contributing most prominently to the VISNs' outlier status are identified in Tables 2-2, 2-4 and 2-6. Table 2-7 summarizes the number of critical monitors that are outliers for each VISN. The WSDTTs switched during the third quarter of the fiscal year from a more extensive evaluation protocol to completion of PSF forms on veterans new to treatment. Due to the low number of forms completed in this short interval, the WSDTTs were not included in the calculations of outliers on critical monitors for FY 2001.

VISNs 1, 2, 13 and 20 are outliers in veterans' **war zone service**. The particular programs contributing most to the outlier status in these VISNs are the Boston HCS (Boston) PCT and the Connecticut HCS (West Haven) PCT within VISN 1; the Canandaigua PCT within VISN 2; the Black Hills HCS (Fort Meade) SUPT within VISN 13; and the Boise PCT, the Portland PCT, the

Puget Sound HCS (American Lake) PCT, and the Spokane PCT within VISN 20. Other individual programs which are outliers are the Coatesville PCT within VISN 4; the Maryland HCS PCTs at Baltimore and Perry Point within VISN 5; the Tampa PCT within VISN 8; the Ann Arbor PCT within VISN 11; the Iowa City PCT within VISN 14; the Wichita PCT within VISN 15; and the Greater Los Angeles HCS (West LA) PCT within VISN 22. The percentage of veterans who have served in a war zone is lower in these VISNs and individual programs than in other VISNs and programs.

VISNs 2, 13 and 22 are outliers in ***PTSD clinical diagnosis***. The particular programs contributing most to the outlier status in these VISNs are the Canandaigua PCT within VISN 2; the Black Hills HCS (Fort Meade) SUPT and the Minneapolis PCT within VISN 13; and the Greater Los Angeles HCS (West LA) PCT within VISN 22. Individual programs which are outliers in other VISNs are the Maryland HCS PCT at Perry Point within VISN 5; the Charleston PCT within VISN 7; the Tampa PCT within VISN 8; the Louisville PCT within VISN 9; the Ann Arbor PCT within VISN 11; the Wichita PCT within VISN 15; the Fayetteville AR and the Houston PCTs within VISN 16; the Central TX Veterans HCS (Waco) PCT within VISN 17; and the Boise PCT within VISN 20. The percentage of veterans who have a clinical diagnosis of PTSD is lower in these VISNs and individual programs than in others.

VISNs 7 and 19 are outliers in ***substance abuse diagnosis***. Within these VISNs the particular programs contributing most to the outlier status are the Atlanta and the Augusta PCTs within VISN 7 and the Salt Lake City PCT within VISN 19. Other individual programs which are outliers include the Manchester PCT within VISN 1; the Pittsburgh HCS (Highland Drive) PCT within VISN 4; the Durham PCT within VISN 6; the San Juan PCT within VISN 8; the Chillicothe and the Columbus PCTs in VISN 10; the Poplar Bluff and the St. Louis PCTs within VISN 15; and the Jackson PCT within VISN 16. The percentage of veterans who are diagnosed with a substance abuse disorder is lower in these VISNs and individual programs than in others.

VISNs 3, 5 and 7 are outliers in ***validation of war zone service by DD214***. Within these VISNs the particular programs contributing most to the outlier status are the New Jersey HCS (East Orange) PCT and the New York Harbor HCS (Brooklyn) PCT in VISN 3; the Maryland HCS (Baltimore) PCT within VISN 5; and the Augusta and Charleston PCTs in VISN 7. In addition, other programs which are outliers are the Connecticut HCS (West Haven) PCT within VISN 1; the Salisbury PCT within VISN 6; the San Juan and Tampa PCTs within VISN 8; the Sioux Falls PCT within VISN 13; the St. Louis PCT within VISN 15; the Central Texas Veterans HCS (Temple) PCT within VISN 17; the Southern Arizona HCS (Tucson) PCT within VISN 18; the Salt Lake City PCT within VISN 19; the Puget Sound HCS (Seattle) PCT within VISN 20; the Northern California HCS PCT within VISN 21; and the San Diego PCT within VISN 22. The percentage of veterans admitted to treatment without having their war zone service verified by reference to the DD214 or similar military records is lower in these VISNs and individual programs than it is in others.

VISNs 7 and 8 are outliers in admitting higher percentages of veterans who have had ***prior psychiatric treatment***. The Augusta PCT in VISN 7 and the San Juan and Tampa PCTs in VISN 8 were the programs contributing most to the outlier status in those VISNs. In addition,

other individual programs which are outliers include the Canandaigua PCT within VISN 2; the Pittsburgh HCS (Highland Drive) SUPT in VISN 4; the Maryland HCS (Perry Point) PCT in VISN 5; the Fayetteville NC PCT in VISN 6; the Battle Creek PCT in VISN 11; the Central Iowa HCS (Knoxville) PCT and the Nebraska-Western Iowa HCS (Lincoln) PCT in VISN 14; the Grand Junction PCT in VISN 19; and the San Francisco SUPT in VISN 21. The percentage of veterans who have had prior psychiatric treatment was higher in these VISNs and individual programs than in others.

VISNs 7, 12 and 14 are outliers in admitting veterans who have had ***prior specialized PTSD treatment***. The Augusta PCT and the Tuscaloosa PCT within VISN 7; the Chicago HCS (West Side) PCT within VISN 12; and the Nebraska-Western Iowa HCS (Lincoln) in VISN 14 were outliers. Outlier programs within other VISNs include the Connecticut HCS (West Haven) SUPT and the White River Junction PCT within VISN 1; the Coatesville PCT within VISN 4; No. Florida/So. Georgia HCS (Gainesville) PCT within VISN 8; the Dayton PCT in VISN 10; the Portland PCT within VISN 20; and the San Francisco SUPT within VISN 21. The percentage of veterans who have had prior specialized PTSD treatment was higher in these VISNs and individual programs than in others.

VISNs 4, 5, 13 and 21 are outliers in the ***number of PSFs submitted per FTEE***. The number of PTSD Status Forms per FTEE submitted was lower in these VISNs, although no individual program was an outlier. Within each of these VISNs, all programs were below the mean for all programs.

VISNs 4, 5, 19 and 21 are outliers in the ***proportion of PSFs submitted per total number of new individuals treated***. The proportion of PTSD Status Forms per new veterans treated was lower in these VISNs than in others. The Coatesville and the Philadelphia PCTs within VISN 4; the Maryland HCS (Baltimore and Perry Point) PCTs with VISN 5; all three PCTs (Cheyenne, Grand Junction and Salt Lake City) with VISN 19; and the Palo Alto HCS (San Jose) and the San Francisco PCT within VISN 21 were outliers. Outlier programs within other VISNs include the Boston HCS (Boston) PCT within VISN 1; the Bronx PCT in VISN 3; the Tuscaloosa PCT in VISN 7; the Lexington PCT in VISN 9; the Eastern Kansas HCS (Topeka) PCT in VISN 15; the Fayetteville AR and the New Orleans PCTs within VISN 16; the New Mexico HCS (Albuquerque) PCT in VISN 18, and the Greater Los Angeles HCS (East LA) PCT in VISN 22. The number of PSFs submitted per total number of new veterans treated for the year was lower in these VISNs and these individual programs than in others.

The number of critical monitors that were outliers is tabulated for each VISN in Table 2-7. Adjustment for the different number of programs across the VISNs was made by calculating the mean number of outliers for each VISN. VISNs that are outliers for the outliers themselves are VISN 5, VISN 8, VISN 19 and VISN 20. The mean number of outliers was higher in these VISNs than in others.

Description of Veterans' Other Characteristics

Several other veterans' characteristics are presented for descriptive purposes in Tables 2-5, 2-8, 2-10, 2-12, 2-14, 2-16, 2-18 and 2-20 for the VISNs and Tables 2-6, 2-9, 2-11, 2-13, 2-15, 2-17, 2-19 and 2-21 for individual programs. These characteristics have not been designated as critical monitors because they have not been considered critical for evaluating the operation of the programs with regard to carrying out the mission of specialized PTSD programs. Further, outliers have not been identified because it is often not possible to define one tail of the distribution as more or less desirable than the other tail. A description of the population being served by the programs can be summarized at the VISN level as follows.

Veterans averaged 53.9 years of age (sd=1.3). Eighty-nine percent (sd=4%) had a high school education or more, and 67% (sd=5%) were not working currently. Twenty-one percent (sd=6%) reported difficulty controlling violent behavior. Ninety-five percent (sd=3%) were male; and currently 52% (sd=9%) were married, 36% (sd=6%) were separated or divorced, and 9% (sd=4%) had never been married. Sixty-five percent (sd=18%) were Caucasian, 24% (sd=19%) African-American, 8% (sd=10%) Hispanic and 3% (sd=4%) were of other racial/ethnic background.

Six percent (sd=2%) served during the World War II era, 5% (sd=2%) during the Korean War era, 76% (sd=6%) during the Vietnam War era, and 9% (sd=3%) during the Persian Gulf War era. Eighty-two percent (sd=6%) were exposed to enemy/friendly fire; 9% (sd=4%) participated in atrocities; and 2% (sd=1%) were prisoners of war. Fifty-four percent (sd=7%) of the veterans were service connected.

At the time of admission to the programs, 64% (sd=10%) of the veterans were already prescribed psychotropic medications; 47% (sd=13%) were diagnosed with an Axis I nonpsychotic disorder other than PTSD; 7% (sd=4%) were diagnosed with an Axis I psychotic disorder; and 9% (sd=5%) were diagnosed with an Axis II personality disorder. Seventy-four percent (sd=11%) were referred by another VAMC program; 5% (sd=4%) were referred from a Vet Center; 14% (sd=8%) were self-referred; and 6% (sd=6%) were referred from other sources. Seventy-four percent (sd=6%) of the veterans reported having a chronic medical problem which interfered with their lives; 18% (sd=5%) reported having been incarcerated for more than two weeks over their lifetime; 5% (sd=4%) were evaluated for PTSD due to sexual trauma which occurred during active military duty, and 10% (sd=5%) were evaluated for PTSD due to noncombat nonsexual trauma incurred in the course of military duties.

Table 2-1. War Zone Service and Clinical Diagnosis Among Veterans in
Specialized outpatient PTSD Programs, by VISN: FY 2001.

VISN	N	War Zone Service	PTSD Clinical Diagnosis	Combined PTSD/PTSS Diagnosis	Substance Abuse Diagnosis	Validation By DD214
1	659	78%	82%	89%	46%	66%
2	110	75%	64%	84%	54%	80%
3	490	89%	86%	91%	37%	34%
4	231	86%	89%	97%	51%	58%
5	172	88%	82%	91%	39%	45%
6	481	86%	88%	92%	32%	66%
7	1,028	92%	93%	97%	26%	47%
8	655	88%	74%	90%	37%	68%
9	335	94%	89%	100%	52%	79%
10	612	88%	93%	95%	30%	86%
11	313	86%	79%	87%	50%	79%
12	168	91%	99%	100%	71%	81%
13	253	76%	58%	80%	42%	66%
14	213	85%	84%	93%	38%	93%
15	495	89%	81%	91%	39%	59%
16	633	87%	76%	84%	31%	68%
17	833	89%	90%	93%	40%	54%
18	560	88%	86%	94%	29%	50%
19	176	88%	78%	93%	17%	62%
20	1,103	75%	81%	86%	54%	66%
21	246	94%	86%	96%	41%	54%
22	616	81%	69%	88%	47%	54%
TOTAL	10,382					
MEAN	472	86%	82%	91%	41%	64%
S.D	280	6%	10%	5%	12%	15%

Boxed cell indicates an outlier in the undesirable direction.

Table 2-2. War Zone Service and Clinical Diagnosis Among Veterans
in Specialized Outpatient PTSD Programs: FY 2001.

VISN	FACILITY	PROGRAM	N	War Zone Service	PTSD Clinical Diagnosis	Combined PTSD/PTSS Diagnosis	Substance Abuse Diagnosis	Validation by DD214
1	BOSTON HCS: Boston	PCT	88	70%	69%	86%	57%	58%
1	BOSTON HCS: Boston	WSDTT	23	17%	39%	43%	18%	70%
1	BOSTON HCS: Brockton	PCT	73	96%	90%	92%	49%	58%
1	BOSTON HCS: Brockton	SUPT	41	90%	95%	100%	56%	98%
1	CT HCS: West Haven	PCT	124	71%	72%	79%	27%	33%
1	CT HCS: West Haven	SUPT	56	88%	84%	93%	94%	41%
1	MANCHESTER	PCT	30	87%	90%	93%	7%	100%
1	PROVIDENCE	PCT	176	78%	91%	94%	48%	91%
1	WHITE RIVER JUNCTION	PCT	48	81%	90%	98%	27%	67%
2	CANANDAIGUA	PCT	62	58%	55%	90%	69%	71%
2	WESTERN NY HCS: Batavia	PCT	48	96%	75%	75%	33%	92%
3	BRONX	PCT	18	83%	89%	94%	22%	78%
3	NJ HCS: East Orange	PCT	138	88%	80%	81%	59%	5%
3	NY Harbor HCS: Brooklyn	PCT	181	92%	85%	94%	36%	13%
3	NY Harbor HCS: New York	PCT	153	86%	92%	97%	33%	80%
4	COATESVILLE	PCT	31	71%	84%	90%	52%	97%
4	PHILADELPHIA	PCT	88	81%	98%	100%	50%	39%
4	PITTSBURGH HCS: Highland Drive	PCT	66	95%	79%	97%	18%	64%
4	PITTSBURGH HCS: Highland Drive	SUPT	46	93%	91%	98%	100%	61%
5	MD HCS: Baltimore	PCT	13	77%	77%	100%	69%	23%
5	MD HCS: Perry Point	PCT	42	64%	48%	76%	79%	62%
5	WASHINGTON DC	PCT	117	98%	95%	95%	21%	41%
6	ASHEVILLE	PCT	18	100%	100%	100%	22%	100%
6	DURHAM	PCT	113	84%	97%	97%	15%	62%
6	FAYETTEVILLE NC	PCT	99	90%	88%	92%	19%	89%
6	HAMPTON	PCT	144	81%	94%	97%	59%	75%
6	SALISBURY	PCT	107	91%	69%	79%	25%	33%
7	ATLANTA	PCT	63	84%	89%	90%	17%	67%
7	AUGUSTA	PCT	422	94%	97%	100%	17%	20%
7	BIRMINGHAM	PCT	72	92%	93%	94%	37%	44%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	117	90%	95%	100%	34%	58%
7	CHARLESTON	PCT	92	87%	61%	79%	28%	3%
7	DUBLIN	PCT	216	94%	100%	100%	40%	96%
7	TUSCALOOSA	PCT	46	98%	96%	98%	26%	96%
8	BAY PINES	SUPT	292	88%	73%	87%	43%	77%
8	MIAMI	PCT	68	90%	82%	93%	30%	99%
8	North FL/South GA HS: Gainesville	PCT	127	89%	87%	92%	49%	98%
8	SAN JUAN	PCT	105	94%	76%	99%	1%	15%
8	TAMPA	PCT	63	76%	43%	83%	49%	25%
9	LEXINGTON	PCT	34	94%	100%	100%	29%	41%
9	LOUISVILLE	PCT	65	89%	63%	98%	32%	98%
9	MEMPHIS	PCT	89	97%	99%	100%	69%	88%
9	MOUNTAIN HOME	PCT	147	95%	91%	100%	56%	73%
10	BRECKSVILLE	PCT	134	93%	97%	100%	36%	83%
10	BRECKSVILLE	WSDTT	3	33%	100%	100%	33%	0%
10	CHILLICOTHE	PCT	173	86%	100%	100%	18%	99%
10	CINCINNATI	PCT	107	86%	73%	75%	54%	87%
10	COLUMBUS	PCT	72	90%	93%	100%	10%	64%
10	DAYTON	PCT	123	86%	96%	99%	30%	86%
11	ANN ARBOR	PCT	40	68%	28%	48%	55%	53%
11	BATTLE CREEK	PCT	71	93%	83%	87%	56%	46%
11	DANVILLE	PCT	137	91%	83%	92%	48%	96%
11	NORTHERN IN HCS: Marion	PCT	65	78%	95%	98%	45%	95%

Table 2-2. War Zone Service and Clinical Diagnosis Among Veterans
in Specialized Outpatient PTSD Programs: FY 2001.

VISN	FACILITY	PROGRAM	N	War Zone Service	PTSD Clinical Diagnosis	Combined PTSD/PTSS Diagnosis	Substance Abuse Diagnosis	Validation by DD214
12	CHICAGO HCS: West Side	PCT	115	98%	98%	100%	80%	89%
12	HINES	PCT	44	89%	100%	100%	60%	73%
12	MADISON	WSDTT	9	11%	100%	100%	11%	22%
13	BLACK HILLS HCS: Fort Meade	SUPT	103	70%	63%	83%	55%	89%
13	MINNEAPOLIS	PCT	140	81%	52%	78%	33%	54%
13	SIOUX FALLS	PCT	10	80%	80%	90%	20%	0%
14	CENTRAL IA HCS: Knoxville	PCT	30	93%	70%	90%	37%	93%
14	IOWA CITY	PCT	83	77%	80%	89%	26%	99%
14	NE-WESTERN IA HCS: Lincoln	PCT	22	82%	95%	100%	27%	91%
14	NE-WESTERN IA HCS: Omaha	PCT	78	90%	91%	97%	55%	87%
15	EASTERN KS HCS: Topeka	PCT	58	95%	95%	98%	38%	81%
15	KANSAS CITY	PCT	202	88%	72%	85%	63%	70%
15	POPLAR BLUFF	PCT	30	93%	100%	100%	13%	97%
15	ST. LOUIS	PCT	114	97%	98%	99%	5%	19%
15	WICHITA	PCT	91	74%	66%	84%	39%	58%
16	FAYETTEVILLE AR	PCT	41	98%	66%	95%	29%	54%
16	GULF COAST VETERANS HCS: Biloxi	PCT	112	93%	95%	97%	31%	79%
16	HOUSTON	PCT	239	79%	58%	68%	30%	60%
16	JACKSON	PCT	79	89%	78%	86%	14%	53%
16	NEW ORLEANS	PCT	94	97%	98%	100%	49%	76%
16	NEW ORLEANS	WSDTT	4	0%	75%	75%	0%	100%
16	OKLAHOMA CITY	PCT	64	86%	80%	88%	30%	92%
17	CENTRAL TX VETERANS HCS: Temple	PCT	385	86%	96%	98%	41%	10%
17	CENTRAL TX VETERANS HCS: Waco	PCT	66	83%	47%	50%	29%	89%
17	NORTH TX HCS: Dallas	PCT	131	95%	96%	98%	32%	83%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	92%	88%	95%	45%	96%
18	EL PASO VA HCS	PCT	166	92%	83%	93%	38%	47%
18	NM HCS: Albuquerque	PCT	135	81%	96%	99%	33%	70%
18	PHOENIX	PCT	131	95%	94%	98%	24%	60%
18	SOUTHERN AZ HCS: Tucson	PCT	128	81%	71%	86%	20%	24%
19	CHEYENNE	PCT	16	88%	94%	100%	38%	50%
19	GRAND JUNCTION	PCT	45	87%	71%	100%	27%	78%
19	SALT LAKE CITY	PCT	115	91%	74%	95%	12%	30%
20	BOISE	PCT	101	71%	53%	66%	41%	61%
20	PORTLAND	PCT	272	69%	72%	73%	43%	96%
20	PUGET SOUND HCS: American Lake	PCT	202	77%	93%	98%	46%	54%
20	PUGET SOUND HCS: Seattle	PCT	204	82%	91%	96%	35%	20%
20	SPOKANE	PCT	324	77%	83%	89%	81%	78%
21	HONOLULU	PCT	40	95%	70%	85%	42%	83%
21	NORTHERN CA HCS	PCT	60	88%	98%	100%	24%	28%
21	PALO ALTO HCS: San Jose	PCT	45	96%	71%	96%	39%	40%
21	SAN FRANCISCO	PCT	75	97%	92%	99%	34%	60%
21	SAN FRANCISCO	SUPT	26	92%	92%	92%	100%	77%
22	GREATER LOS ANGELES HCS: East LA	PCT	48	90%	81%	88%	27%	63%
22	GREATER LOS ANGELES HCS: West LA	PCT	209	71%	52%	94%	67%	57%
22	LOMA LINDA	PCT	69	99%	81%	93%	53%	94%
22	LOMA LINDA	WSDTT	15	0%	47%	60%	0%	60%
22	SAN DIEGO	PCT	275	86%	75%	83%	41%	33%
TOTAL			10,382					
MEAN			108	87%	82%	92%	40%	65%
S.D.			80	9%	15%	10%	20%	27%

Boxed cell indicates an outlier in the undesirable direction.

Data for WSDTTs were not included in the formulas to determine means and standard deviations. WSDTTs were not counted as outliers.

Table 2-3. Prior Treatment Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2001.

VISN	N	Prior Psych. Treatment	Prior Spec. PTSD Treatment	#PSFs Per FTEE	%PSFs/New Veterans Treated
1	659	76%	21%	19.6	64%
2	110	81%	30%	13.8	50%
3	490	59%	19%	25.7	107%
4	231	68%	18%	10.4	31%
5	172	78%	18%	12.7	30%
6	481	75%	15%	33.9	80%
7	1,028	83%	47%	29.6	117%
8	655	81%	25%	26.2	104%
9	335	65%	11%	27.2	65%
10	612	57%	16%	18.2	76%
11	313	73%	11%	22.7	77%
12	168	81%	34%	15.7	66%
13	253	77%	19%	12.9	94%
14	213	82%	32%	16.2	79%
15	495	73%	11%	22.4	87%
16	633	64%	14%	14.0	52%
17	833	74%	16%	40.2	120%
18	560	73%	23%	26.0	69%
19	176	63%	22%	13.7	33%
20	1,103	80%	29%	24.6	65%
21	246	73%	26%	10.9	33%
22	616	78%	25%	25.6	80%
TOTAL	10,382				71%
MEAN	472	73%	22%	21.0	72%
S.D.	280	8%	9%	7.9	27%

Boxed cell indicates an outlier in the undesirable direction.

Table 2-4. Prior Treatment Among Veterans in Specialized Outpatient PTSD Programs: FY 2001.

VISN	FACILITY	PROGRAM	N	Prior Psych. Treatment	Prior Spec. PTSD Treatment	#PSFs Per FTEE	%PSFs/New Veterans Treated
1	BOSTON HCS: Boston	PCT	88	83%	17%	22.3	30%
1	BOSTON HCS: Boston	WSDTT	23	96%	43%	6.7	30%
1	BOSTON HCS: Brockton	PCT	73	74%	22%	20.7	57%
1	BOSTON HCS: Brockton	SUPT	41	78%	12%	20.0	91%
1	CT HCS: West Haven	PCT	124	73%	15%	20.9	91%
1	CT HCS: West Haven	SUPT	56	84%	54%	12.6	117%
1	MANCHESTER	PCT	30	73%	10%	13.6	75%
1	PROVIDENCE	PCT	176	67%	10%	35.3	97%
1	WHITE RIVER JUNCTION	PCT	48	81%	48%	15.5	44%
2	CANANDAIGUA	PCT	62	89%	29%	13.0	42%
2	WESTERN NY HCS: Batavia	PCT	48	71%	31%	14.9	72%
3	BRONX	PCT	18	50%	6%	2.9	31%
3	NJ HCS: East Orange	PCT	138	44%	20%	64.2	159%
3	NY Harbor HCS: Brooklyn	PCT	181	64%	19%	37.9	112%
3	NY Harbor HCS: New York	PCT	153	68%	20%	25.5	100%
4	COATESVILLE	PCT	31	81%	42%	4.8	39%
4	PHILADELPHIA	PCT	88	64%	18%	10.6	20%
4	PITTSBURGH HCS: Highland Drive	PCT	66	53%	6%	14.2	40%
4	PITTSBURGH HCS: Highland Drive	SUPT	46	91%	17%	15.4	68%
5	MD HCS: Baltimore	PCT	13	77%	15%	6.3	9%
5	MD HCS: Perry Point	PCT	42	90%	17%	10.2	15%
5	WASHINGTON DC	PCT	117	74%	19%	16.0	66%
6	ASHEVILLE	PCT	18	72%	0%	15.0	90%
6	DURHAM	PCT	113	63%	25%	25.6	55%
6	FAYETTEVILLE NC	PCT	99	97%	20%	210.6	129%
6	HAMPTON	PCT	144	69%	4%	28.2	68%
6	SALISBURY	PCT	107	75%	18%	36.0	124%
7	ATLANTA	PCT	63	84%	21%	22.7	64%
7	AUGUSTA	PCT	422	96%	82%	36.9	N.R.
7	BIRMINGHAM	PCT	72	75%	21%	18.0	69%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	117	73%	25%	25.0	81%
7	CHARLESTON	PCT	92	58%	15%	28.3	90%
7	DUBLIN	PCT	216	82%	23%	37.6	109%
7	TUSCALOOSA	PCT	46	56%	39%	16.2	25%
8	BAY PINES	SUPT	292	76%	32%	34.7	151%
8	MIAMI	PCT	68	84%	15%	17.1	76%
8	North FL/South GA HS: Gainesville	PCT	127	80%	37%	27.5	94%
8	SAN JUAN	PCT	105	90%	10%	26.3	109%
8	TAMPA	PCT	63	86%	10%	15.8	55%
9	LEXINGTON	PCT	34	65%	9%	11.7	33%
9	LOUISVILLE	PCT	65	58%	15%	33.3	67%
9	MEMPHIS	PCT	89	67%	12%	31.8	60%
9	MOUNTAIN HOME	PCT	147	68%	10%	31.8	88%
10	BRECKSVILLE	PCT	134	65%	6%	11.1	77%
10	BRECKSVILLE	WSDTT	3	100%	67%	0.9	8%
10	CHILLICOTHE	PCT	173	31%	1%	46.3	115%
10	CINCINNATI	PCT	107	57%	17%	12.4	65%
10	COLUMBUS	PCT	72	56%	6%	20.1	90%
10	DAYTON	PCT	123	85%	50%	60.9	60%
11	ANN ARBOR	PCT	40	85%	20%	13.7	82%
11	BATTLE CREEK	PCT	71	90%	10%	14.9	42%
11	DANVILLE	PCT	137	63%	7%	48.9	119%
11	NORTHERN IN HCS: Marion	PCT	65	69%	12%	19.7	84%

Table 2-4. Prior Treatment Among Veterans in Specialized Outpatient PTSD Programs: FY 2001.

VISN	FACILITY	PROGRAM	N	Prior Psych. Treatment	Prior Spec. PTSD Treatment	#PSFs Per FTEE	%PSFs/New Veterans Treated
12	CHICAGO HCS: West Side	PCT	115	82%	45%	18.5	89%
12	HINES	PCT	44	77%	9%	13.3	40%
12	MADISON	WSDTT	9	100%	11%	7.6	60%
13	BLACK HILLS HCS: Fort Meade	SUPT	103	78%	15%	21.5	111%
13	MINNEAPOLIS	PCT	140	77%	24%	10.0	88%
13	SIOUX FALLS	PCT	10	70%	10%	12.5	56%
14	CENTRAL IA HCS: Knoxville	PCT	30	90%	20%	28.0	86%
14	IOWA CITY	PCT	83	74%	27%	18.4	91%
14	NE-WESTERN IA HCS: Lincoln	PCT	22	91%	73%	7.3	46%
14	NE-WESTERN IA HCS: Omaha	PCT	78	85%	32%	17.0	81%
15	EASTERN KS HCS: Topeka	PCT	58	83%	10%	8.3	37%
15	KANSAS CITY	PCT	202	76%	9%	61.4	108%
15	POPLAR BLUFF	PCT	30	80%	0%	12.0	100%
15	ST. LOUIS	PCT	114	65%	11%	22.4	99%
15	WICHITA	PCT	91	64%	18%	21.5	83%
16	FAYETTEVILLE AR	PCT	41	58%	5%	9.2	34%
16	GULF COAST VETERANS HCS: Biloxi	PCT	112	60%	23%	28.3	118%
16	HOUSTON	PCT	239	63%	7%	15.9	73%
16	JACKSON	PCT	79	69%	24%	16.4	49%
16	NEW ORLEANS	PCT	94	61%	18%	9.6	26%
16	NEW ORLEANS	WSDTT	4	75%	75%	1.9	16%
16	OKLAHOMA CITY	PCT	64	75%	9%	12.9	58%
17	CENTRAL TX VETERANS HCS: Temple	PCT	385	79%	18%	70.5	150%
17	CENTRAL TX VETERANS HCS: Waco	PCT	66	57%	26%	17.0	97%
17	NORTH TX HCS: Dallas	PCT	131	84%	15%	23.1	56%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	66%	11%	44.2	185%
18	EL PASO VA HCS	PCT	166	78%	30%	36.5	92%
18	NM HCS: Albuquerque	PCT	135	80%	12%	16.5	35%
18	PHOENIX	PCT	131	70%	32%	27.6	126%
18	SOUTHERN AZ HCS: Tucson	PCT	128	64%	15%	31.8	93%
19	CHEYENNE	PCT	16	81%	19%	8.0	18%
19	GRAND JUNCTION	PCT	45	89%	33%	18.0	35%
19	SALT LAKE CITY	PCT	115	52%	19%	13.8	37%
20	BOISE	PCT	101	76%	18%	14.4	69%
20	PORTLAND	PCT	272	81%	36%	30.2	67%
20	PUGET SOUND HCS: American Lake	PCT	202	72%	21%	15.7	48%
20	PUGET SOUND HCS: Seattle	PCT	204	85%	32%	15.7	40%
20	SPOKANE	PCT	324	82%	31%	108.0	134%
21	HONOLULU	PCT	40	53%	8%	10.3	47%
21	NORTHERN CA HCS	PCT	60	71%	17%	21.6	78%
21	PALO ALTO HCS: San Jose	PCT	45	82%	27%	11.5	18%
21	SAN FRANCISCO	PCT	75	72%	35%	8.8	26%
21	SAN FRANCISCO	SUPT	26	92%	46%	7.4	113%
22	GREATER LOS ANGELES HCS: East LA	PCT	48	56%	23%	12.3	39%
22	GREATER LOS ANGELES HCS: West LA	PCT	209	81%	16%	21.0	107%
22	LOMA LINDA	PCT	69	83%	30%	34.5	100%
22	LOMA LINDA	WSDTT	15	100%	13%	5.8	25%
22	SAN DIEGO	PCT	275	78%	32%	48.6	89%
TOTAL			10,382				
MEAN			108	73%	21%	25.1	75%
S.D.			80	12%	14%	24.9	36%

Boxed cell indicates an outlier in the undesirable direction.

Data for WSDTTs were not included in the formulas to determine means and standard deviations. WSDTTs were not counted as outliers.

Table 2-5. Age, Education and Working Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2001.

VISN	N	Age	High School Education Or More	Not Working	Violent Behavior
1	659	53.6	88%	63%	21%
2	110	51.5	94%	69%	20%
3	490	55.8	85%	70%	18%
4	231	52.4	89%	62%	18%
5	172	53.3	91%	65%	30%
6	481	54.9	88%	67%	25%
7	1,028	53.7	89%	79%	30%
8	655	54.6	90%	73%	19%
9	335	55.1	75%	67%	27%
10	612	54.8	89%	69%	15%
11	313	53.4	91%	64%	19%
12	168	53.4	92%	71%	21%
13	253	51.8	92%	57%	12%
14	213	53.2	93%	66%	10%
15	495	55.2	88%	64%	15%
16	633	54.5	84%	67%	20%
17	833	53.2	90%	62%	34%
18	560	55.0	91%	66%	23%
19	176	55.5	92%	64%	15%
20	1,103	51.7	94%	71%	24%
21	246	55.6	93%	67%	24%
22	616	54.1	86%	73%	24%
TOTAL	10,382				
MEAN	472	53.9	89%	67%	21%
S.D.	280	1.3	4%	5%	6%

Table 2-6. Sociodemographic Background and Social Functioning Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2001.

VISN	FACILITY	Program	N	Age	High School Education Or More	Not Working	Violent Behavior
1	BOSTON HCS: Boston	PCT	88	52.4	90%	59%	14%
1	BOSTON HCS: Boston	WSDTT	23	45.0	100%	65%	4%
1	BOSTON HCS: Brockton	PCT	73	55.1	93%	63%	17%
1	BOSTON HCS: Brockton	SUPT	41	53.4	85%	63%	63%
1	CT HCS: West Haven	PCT	124	52.0	93%	55%	18%
1	CT HCS: West Haven	SUPT	56	52.9	84%	72%	24%
1	MANCHESTER	PCT	30	53.6	93%	52%	100%
1	PROVIDENCE	PCT	176	55.3	78%	64%	6%
1	WHITE RIVER JUNCTION	PCT	48	57.1	92%	85%	18%
2	CANANDAIGUA	PCT	62	50.1	95%	79%	24%
2	WESTERN NY HCS: Batavia	PCT	48	53.2	92%	56%	15%
3	BRONX	PCT	18	56.6	94%	61%	44%
3	NJ HCS: East Orange	PCT	138	57.2	88%	71%	5%
3	NY Harbor HCS: Brooklyn	PCT	181	55.8	80%	67%	9%
3	NY Harbor HCS: New York	PCT	153	54.4	88%	73%	36%
4	COATESVILLE	PCT	31	50.8	97%	55%	45%
4	PHILADELPHIA	PCT	88	50.8	90%	60%	14%
4	PITTSBURGH HCS: Highland Drive	PCT	66	56.6	82%	62%	9%
4	PITTSBURGH HCS: Highland Drive	SUPT	46	50.7	91%	72%	20%
5	MD HCS: Baltimore	PCT	13	53.8	100%	85%	0%
5	MD HCS: Perry Point	PCT	42	51.6	93%	56%	62%
5	WASHINGTON DC	PCT	117	53.8	90%	66%	22%
6	ASHEVILLE	PCT	18	53.7	83%	67%	56%
6	DURHAM	PCT	113	54.3	85%	58%	45%
6	FAYETTEVILLE	PCT	99	57.7	91%	79%	33%
6	HAMPTON	PCT	144	52.8	90%	70%	10%
6	SALISBURY	PCT	107	55.8	87%	64%	10%
7	ATLANTA	PCT	63	54.1	97%	65%	41%
7	AUGUSTA	PCT	422	54.8	90%	89%	38%
7	BIRMINGHAM	PCT	72	52.3	89%	81%	46%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	117	51.8	86%	74%	44%
7	CHARLESTON	PCT	92	53.3	91%	60%	9%
7	DUBLIN	PCT	216	53.2	87%	81%	10%
7	TUSCALOOSA	PCT	46	53.1	96%	53%	11%
8	BAY PINES	SUPT	292	55.3	89%	72%	18%
8	MIAMI	PCT	68	55.2	87%	65%	16%
8	NORTH FL/SOUTH GA HS: Gainesville	PCT	127	53.9	90%	75%	12%
8	SAN JUAN	PCT	105	53.3	95%	74%	20%
8	TAMPA	PCT	63	54.0	86%	79%	40%
9	LEXINGTON	PCT	34	54.9	71%	67%	3%
9	LOUISVILLE	PCT	65	52.9	74%	75%	38%
9	MEMPHIS	PCT	89	55.7	78%	69%	13%
9	MOUNTAIN HOME	PCT	147	55.9	74%	62%	35%
10	BRECKSVILLE	PCT	134	57.6	78%	67%	2%
10	BRECKSVILLE	WSDTT	3	34.3	100%	100%	0%
10	CHILLICOTHE	PCT	173	54.8	100%	77%	1%
10	CINCINNATI	PCT	107	51.7	87%	59%	39%
10	COLUMBUS	PCT	72	54.4	86%	63%	8%
10	DAYTON	PCT	123	55.0	89%	69%	35%
11	ANN ARBOR	PCT	40	54.4	85%	69%	5%
11	BATTLE CREEK	PCT	71	52.9	94%	66%	7%
11	DANVILLE	PCT	137	55.0	88%	66%	35%
11	NORTHERN IN HCS: Marion	PCT	65	50.2	95%	57%	8%

Table 2-6. Sociodemographic Background and Social Functioning Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2001.

VISN	FACILITY	Program	N	Age	High School Education Or More	Not Working	Violent Behavior
12	CHICAGO HCS: West Side	PCT	115	53.1	90%	79%	21%
12	HINES	PCT	44	55.8	93%	55%	26%
12	MADISON	WSDTT	9	46.2	100%	56%	0%
13	BLACK HILLS HCS: Fort Meade	SUPT	103	52.3	92%	61%	19%
13	MINNEAPOLIS	PCT	140	51.8	92%	57%	7%
13	SIOUX FALLS	PCT	10	47.7	100%	10%	10%
14	CENTRAL IA HCS: Knoxville	PCT	30	56.0	90%	67%	3%
14	IOWA CITY	PCT	83	53.9	94%	70%	12%
14	NE-WESTERN IA HCS: Lincoln	PCT	22	51.4	86%	67%	14%
14	NE-WESTERN IA HCS: Omaha	PCT	78	51.9	96%	60%	10%
15	EASTERN KS HCS: Topeka	PCT	58	53.1	95%	62%	21%
15	KANSAS CITY	PCT	202	56.8	87%	69%	13%
15	POPLAR BLUFF	PCT	30	59.6	80%	67%	17%
15	ST. LOUIS	PCT	114	54.1	87%	58%	18%
15	WICHITA	PCT	91	52.8	90%	64%	10%
16	FAYETTEVILLE	PCT	41	58.2	68%	70%	10%
16	GULF COAST HCS: Biloxi	PCT	112	56.0	84%	65%	62%
16	HOUSTON	PCT	239	52.4	87%	64%	15%
16	JACKSON	PCT	79	56.2	76%	72%	6%
16	NEW ORLEANS	PCT	94	55.2	90%	72%	6%
16	NEW ORLEANS	WSDTT	4	48.5	100%	100%	50%
16	OKLAHOMA CITY	PCT	64	54.3	84%	65%	11%
17	CENTRAL TX VETERANS HCS: Temple	PCT	385	52.0	91%	68%	34%
17	CENTRAL TX VETERANS HCS: Waco	PCT	66	53.2	95%	65%	21%
17	NORTH TX HCS: Dallas	PCT	131	54.8	88%	51%	52%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	54.2	90%	57%	29%
18	EL PASO	PCT	166	57.1	87%	72%	26%
18	NM HCS: Albuquerque	PCT	135	53.9	90%	62%	5%
18	PHOENIX	PCT	131	54.1	95%	55%	27%
18	SOUTHERN AZ HCS: Tucson	PCT	128	54.3	95%	73%	33%
19	CHEYENNE	PCT	16	55.4	88%	75%	25%
19	GRAND JUNCTION	PCT	45	55.0	93%	62%	31%
19	SALT LAKE CITY	PCT	115	54.3	91%	56%	11%
20	BOISE	PCT	101	51.7	92%	61%	27%
20	PORTLAND	PCT	272	51.4	91%	71%	29%
20	PUGET SOUND HCS: American Lake	PCT	202	50.7	96%	68%	22%
20	PUGET SOUND HCS: Seattle	PCT	204	51.7	97%	64%	15%
20	SPOKANE	PCT	324	52.5	94%	81%	28%
21	HONOLULU	PCT	40	54.5	88%	63%	20%
21	NORTHERN CA HCS	PCT	60	55.7	93%	77%	10%
21	PALO ALTO HCS: San Jose	PCT	45	57.8	93%	69%	29%
21	SAN FRANCISCO	PCT	75	55.5	93%	57%	30%
21	SAN FRANCISCO	SUPT	26	53.2	100%	79%	35%
22	GREATER LOS ANGELES HCS: East LA	PCT	48	58.2	2%	73%	13%
22	GREATER LOS ANGELES HCS: West LA	PCT	209	51.9	93%	79%	19%
22	LOMA LINDA	PCT	69	55.4	86%	68%	30%
22	LOMA LINDA	WSDTT	15	42.7	100%	80%	0%
22	SAN DIEGO	PCT	275	54.9	93%	68%	33%
TOTAL			10,382				
MEAN			108	54.0	88%	66%	23%
S.D.			80	2.1	11%	10%	17%

Boxed cell indicates an outlier in the undesirable direction.

Table 2-7. Critical Monitors: Summary of Outliers for Specialized Outpatient PTSD Programs, by VISN: FY 2001.*

VISN	# of Progs.	War Zone Service	PTSD Clinical Diagnosis	Subs. Abuse Dx	Valid. by DD214	Prior Psych. Tx	Prior Spec. PTSD Tx	#PSFs Per FTEE	%PSFs Per New Veteran Treated	Total # of Outliers	Mean # Outliers/ Program
1	8	2		1	1		2		1	7	0.9
2	2	1	1			1				3	1.5
3	4				2				1	3	0.8
4	4	1		1		1	1		2	6	1.5
5	3	2	1		1	1			2	7	2.3
6	5			1	1	1				3	0.6
7	7		1	2	2	1	2		1	9	1.3
8	5	1	1	1	2	2	1			8	1.6
9	4		1						1	2	0.5
10	5			2			1			3	0.6
11	4	1	1			1				3	0.8
12	2						1			1	0.5
13	3	1	2		1					4	1.3
14	4	1				2	1			4	1.0
15	5	1	1	2	1				1	6	1.2
16	6		2	1					2	5	0.8
17	4		1		1					2	0.5
18	4				1				1	2	0.5
19	3			1	1	1			3	6	2.0
20	5	4	1		1		2			8	1.6
21	5				1	1	1		2	5	1.0
22	4	1	1		1				1	4	1.0
TOTAL	96	16	14	12	17	12	12	0	18	101	
MEAN											1.1
S.D.											0.5

Boxed cell signifies an outlier in the undesirable direction.

*WSDTTs are excluded from these calculations.

Table 2-8. Gender and Marital Status Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2001.

VISN	N	Male	Married	Separated or Divorced	Never Married
1	659	92%	44%	42%	12%
2	110	94%	33%	48%	15%
3	490	97%	52%	30%	12%
4	231	96%	47%	32%	17%
5	172	98%	41%	45%	11%
6	481	97%	60%	29%	9%
7	1,028	98%	54%	35%	7%
8	655	97%	56%	35%	7%
9	335	99%	67%	28%	3%
10	612	96%	61%	30%	7%
11	313	98%	47%	42%	9%
12	168	95%	35%	46%	15%
13	253	92%	55%	36%	6%
14	213	91%	54%	38%	6%
15	495	97%	55%	37%	5%
16	633	96%	58%	33%	7%
17	833	96%	56%	35%	5%
18	560	94%	59%	32%	6%
19	176	96%	67%	26%	6%
20	1,103	88%	52%	38%	8%
21	246	97%	54%	33%	11%
22	616	93%	38%	45%	15%
TOTAL	10,382				
MEAN	472	95%	52%	36%	9%
S.D.	280	3%	9%	6%	4%

Table 2-9. Gender and Marital Status Among Veterans in Specialized Outpatient PTSD Programs, FY 2001.

VISN	FACILITY	PROGRAM	N	Male	Married	Separated or Divorced	Never Married
1	BOSTON HCS: Boston	PCT	88	100%	33%	48%	15%
1	BOSTON HCS: Boston	WSDTT	23	0%	13%	35%	43%
1	BOSTON HCS: Brockton	PCT	73	100%	42%	40%	18%
1	BOSTON HCS: Brockton	SUPT	41	98%	54%	32%	12%
1	CT HCS: West Haven	PCT	124	95%	46%	38%	13%
1	CT HCS: West Haven	SUPT	56	98%	22%	65%	9%
1	MANCHESTER	PCT	30	97%	62%	34%	0%
1	PROVIDENCE	PCT	176	93%	50%	41%	8%
1	WHITE RIVER JUNCTION	PCT	48	79%	60%	34%	6%
2	CANANDAIGUA	PCT	62	92%	23%	56%	19%
2	WESTERN NY HCS: Batavia	PCT	48	96%	46%	38%	10%
3	BRONX	PCT	18	100%	53%	24%	12%
3	NJ HCS: East Orange	PCT	138	99%	53%	28%	11%
3	NY Harbor HCS: Brooklyn	PCT	181	98%	53%	33%	9%
3	NY Harbor HCS: New York	PCT	153	94%	48%	27%	18%
4	COATESVILLE	PCT	31	94%	55%	23%	19%
4	PHILADELPHIA	PCT	88	93%	40%	35%	20%
4	PITTSBURGH HCS: Highland Drive	PCT	66	97%	65%	21%	9%
4	PITTSBURGH HCS: Highland Drive	SUPT	46	100%	28%	46%	22%
5	MD HCS: Baltimore	PCT	13	100%	54%	31%	15%
5	MD HCS: Perry Point	PCT	42	95%	48%	50%	2%
5	WASHINGTON DC	PCT	117	99%	38%	44%	14%
6	ASHEVILLE	PCT	18	100%	83%	17%	0%
6	DURHAM	PCT	113	99%	54%	30%	13%
6	FAYETTEVILLE	PCT	99	94%	79%	14%	5%
6	HAMPTON	PCT	144	95%	45%	42%	10%
6	SALISBURY	PCT	107	98%	66%	27%	6%
7	ATLANTA	PCT	63	100%	44%	41%	11%
7	AUGUSTA	PCT	422	97%	56%	36%	5%
7	BIRMINGHAM	PCT	72	96%	63%	21%	8%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	117	99%	45%	44%	9%
7	CHARLESTON	PCT	92	98%	58%	29%	11%
7	DUBLIN	PCT	216	97%	54%	35%	6%
7	TUSCALOOSA	PCT	46	100%	62%	29%	7%
8	BAY PINES	SUPT	292	99%	47%	41%	8%
8	MIAMI	PCT	68	97%	50%	36%	13%
8	NORTH FL/SOUTH GA HS: Gainesville	PCT	127	96%	61%	28%	6%
8	SAN JUAN	PCT	105	97%	70%	26%	3%
8	TAMPA	PCT	63	87%	63%	30%	5%
9	LEXINGTON	PCT	34	97%	88%	9%	3%
9	LOUISVILLE	PCT	65	100%	54%	43%	2%
9	MEMPHIS	PCT	89	99%	63%	29%	4%
9	MOUNTAIN HOME	PCT	147	99%	70%	26%	3%
10	BRECKSVILLE	PCT	134	100%	67%	23%	6%
10	BRECKSVILLE	WSDTT	3	0%	33%	33%	33%
10	CHILLICOTHE	PCT	173	99%	61%	28%	8%
10	CINCINNATI	PCT	107	87%	51%	40%	8%
10	COLUMBUS	PCT	72	96%	63%	31%	4%
10	DAYTON	PCT	123	97%	61%	31%	6%
11	ANN ARBOR	PCT	40	93%	55%	33%	13%
11	BATTLE CREEK	PCT	71	100%	34%	51%	13%
11	DANVILLE	PCT	137	99%	54%	37%	7%
11	NORTHERN IN HCS: Marion	PCT	65	97%	40%	51%	5%

Table 2-9. Gender and Marital Status Among Veterans in Specialized Outpatient PTSD Programs, FY 2001.

VISN	FACILITY	PROGRAM	N	Male	Married	Separated or Divorced	Never Married
12	CHICAGO HCS: West Side	PCT	115	100%	32%	46%	18%
12	HINES	PCT	44	100%	43%	41%	11%
12	MADISON	WSDTT	9	0%	44%	56%	0%
13	BLACK HILLS HCS: Fort Meade	SUPT	103	89%	47%	40%	8%
13	MINNEAPOLIS	PCT	140	94%	59%	35%	4%
13	SIOUX FALLS	PCT	10	100%	80%	10%	10%
14	CENTRAL IA HCS: Knoxville	PCT	30	97%	57%	37%	3%
14	IOWA CITY	PCT	83	89%	49%	41%	9%
14	NE-WESTERN IA HCS: Lincoln	PCT	22	82%	55%	36%	5%
14	NE-WESTERN IA HCS: Omaha	PCT	78	92%	56%	36%	5%
15	EASTERN KS HCS: Topeka	PCT	58	100%	50%	40%	10%
15	KANSAS CITY	PCT	202	98%	53%	38%	4%
15	POPLAR BLUFF	PCT	30	100%	80%	20%	0%
15	ST. LOUIS	PCT	114	99%	59%	31%	6%
15	WICHITA	PCT	91	92%	51%	44%	5%
16	FAYETTEVILLE	PCT	41	98%	68%	29%	2%
16	GULF COAST HCS: Biloxi	PCT	112	100%	60%	33%	5%
16	HOUSTON	PCT	239	93%	51%	38%	9%
16	JACKSON	PCT	79	94%	74%	19%	3%
16	NEW ORLEANS	PCT	94	99%	50%	36%	11%
16	NEW ORLEANS	WSDTT	4	0%	25%	50%	25%
16	OKLAHOMA CITY	PCT	64	100%	63%	32%	2%
17	CENTRAL TX VETERANS HCS: Temple	PCT	385	94%	48%	44%	6%
17	CENTRAL TX VETERANS HCS: Waco	PCT	66	97%	76%	19%	3%
17	NORTH TX HCS: Dallas	PCT	131	100%	53%	37%	6%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	96%	67%	24%	4%
18	EL PASO	PCT	166	93%	66%	30%	2%
18	NM HCS: Albuquerque	PCT	135	97%	62%	28%	7%
18	PHOENIX	PCT	131	98%	61%	30%	5%
18	SOUTHERN AZ HCS: Tucson	PCT	128	88%	45%	42%	10%
19	CHEYENNE	PCT	16	88%	63%	25%	13%
19	GRAND JUNCTION	PCT	45	96%	64%	34%	2%
19	SALT LAKE CITY	PCT	115	96%	64%	30%	5%
20	BOISE	PCT	101	94%	62%	32%	4%
20	PORTLAND	PCT	272	92%	49%	37%	10%
20	PUGET SOUND HCS: American Lake	PCT	202	81%	58%	33%	9%
20	PUGET SOUND HCS: Seattle	PCT	204	87%	46%	43%	8%
20	SPOKANE	PCT	324	87%	51%	42%	7%
21	HONOLULU	PCT	40	95%	56%	33%	8%
21	NORTHERN CA HCS	PCT	60	97%	68%	20%	8%
21	PALO ALTO HCS: San Jose	PCT	45	98%	64%	18%	13%
21	SAN FRANCISCO	PCT	75	96%	47%	43%	9%
21	SAN FRANCISCO	SUPT	26	100%	19%	58%	19%
22	GREATER LOS ANGELES HCS: East LA	PCT	48	92%	46%	40%	8%
22	GREATER LOS ANGELES HCS: West LA	PCT	209	96%	25%	50%	21%
22	LOMA LINDA	PCT	69	100%	54%	41%	1%
22	LOMA LINDA	WSDTT	15	0%	13%	67%	20%
22	SAN DIEGO	PCT	275	95%	41%	41%	16%
TOTAL			10,382				
MEAN			108	96%	54%	34%	8%
S.D.			80	4%	13%	10%	5%

Boxed cell indicates an outlier in the undesirable direction.

Table 2-10. Race/Ethnicity Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2001.

VISN	N	Caucasian	African-American	Hispanic	Other
1	659	81%	15%	2%	2%
2	110	88%	11%	0%	1%
3	490	43%	41%	14%	1%
4	231	57%	42%	1%	0%
5	172	28%	70%	1%	1%
6	481	52%	44%	2%	2%
7	1,028	51%	44%	1%	4%
8	655	65%	13%	22%	1%
9	335	85%	13%	1%	1%
10	612	85%	13%	1%	1%
11	313	86%	12%	1%	1%
12	168	34%	63%	3%	0%
13	253	77%	7%	2%	15%
14	213	88%	7%	2%	2%
15	495	75%	18%	4%	3%
16	633	59%	32%	6%	3%
17	833	51%	22%	26%	1%
18	560	56%	5%	35%	4%
19	176	77%	3%	17%	3%
20	1,103	84%	7%	3%	6%
21	246	61%	13%	10%	16%
22	616	53%	27%	13%	7%
TOTAL	10,382				
MEAN	472	65%	24%	8%	3%
S.D.	280	18%	19%	10%	4%

Table 2-11. Race/Ethnicity Among Veterans in Specialized Outpatient PTSD Programs: FY 2001.

VISN	FACILITY	PROGRAM	N	Caucasian	African American	Hispanic	Other
1	BOSTON HCS: Boston	PCT	88	72%	23%	5%	1%
1	BOSTON HCS: Boston	WSDTT	23	52%	39%	4%	4%
1	BOSTON HCS: Brockton	PCT	73	84%	12%	4%	0%
1	BOSTON HCS: Brockton	SUPT	41	93%	5%	2%	0%
1	CT HCS: West Haven	PCT	124	74%	20%	3%	2%
1	CT HCS: West Haven	SUPT	56	63%	34%	4%	0%
1	MANCHESTER	PCT	30	87%	7%	0%	7%
1	PROVIDENCE	PCT	176	91%	7%	0%	2%
1	WHITE RIVER JUNCTION	PCT	48	100%	0%	0%	0%
2	CANANDAIGUA	PCT	62	85%	13%	0%	2%
2	WESTERN NY HCS: Batavia	PCT	48	92%	8%	0%	0%
3	BRONX	PCT	18	22%	50%	28%	0%
3	NJ HCS: East Orange	PCT	138	50%	47%	2%	1%
3	NY Harbor HCS: Brooklyn	PCT	181	47%	37%	16%	0%
3	NY Harbor HCS: New York	PCT	153	36%	39%	21%	4%
4	COATESVILLE	PCT	31	58%	42%	0%	0%
4	PHILADELPHIA	PCT	88	34%	63%	2%	1%
4	PITTSBURGH HCS: Highland Drive	PCT	66	79%	21%	0%	0%
4	PITTSBURGH HCS: Highland Drive	SUPT	46	70%	30%	0%	0%
5	MD HCS: Baltimore	PCT	13	54%	46%	0%	0%
5	MD HCS: Perry Point	PCT	42	60%	33%	5%	2%
5	WASHINGTON DC	PCT	117	15%	85%	0%	0%
6	ASHEVILLE	PCT	18	89%	6%	0%	6%
6	DURHAM	PCT	113	40%	56%	3%	2%
6	FAYETTEVILLE	PCT	99	55%	36%	3%	6%
6	HAMPTON	PCT	144	37%	60%	2%	1%
6	SALISBURY	PCT	107	75%	24%	1%	0%
7	ATLANTA	PCT	63	49%	49%	2%	0%
7	AUGUSTA	PCT	422	51%	41%	1%	7%
7	BIRMINGHAM	PCT	72	61%	38%	1%	0%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	117	35%	62%	3%	0%
7	CHARLESTON	PCT	92	53%	46%	1%	0%
7	DUBLIN	PCT	216	56%	41%	1%	2%
7	TUSCALOOSA	PCT	46	50%	41%	7%	2%
8	BAY PINES	SUPT	292	82%	13%	5%	0%
8	MIAMI	PCT	68	32%	44%	24%	0%
8	NORTH FL/SOUTH GA HS: Gainesville	PCT	127	90%	6%	2%	2%
8	SAN JUAN	PCT	105	2%	0%	97%	1%
8	TAMPA	PCT	63	75%	14%	8%	3%
9	LEXINGTON	PCT	34	100%	0%	0%	0%
9	LOUISVILLE	PCT	65	85%	14%	0%	2%
9	MEMPHIS	PCT	89	65%	33%	2%	0%
9	MOUNTAIN HOME	PCT	147	93%	5%	0%	2%
10	BRECKSVILLE	PCT	134	78%	21%	1%	1%
10	BRECKSVILLE	WSDTT	3	33%	33%	0%	33%
10	CHILLICOTHE	PCT	173	94%	5%	1%	0%
10	CINCINNATI	PCT	107	78%	21%	2%	0%
10	COLUMBUS	PCT	72	86%	11%	1%	1%
10	DAYTON	PCT	123	85%	11%	0%	3%
11	ANN ARBOR	PCT	40	90%	10%	0%	0%
11	BATTLE CREEK	PCT	71	69%	30%	1%	0%
11	DANVILLE	PCT	137	91%	7%	2%	0%
11	NORTHERN IN HCS: Marion	PCT	65	92%	5%	0%	3%

Table 2-11. Race/Ethnicity Among Veterans in Specialized Outpatient PTSD Programs: FY 2001.

VISN	FACILITY	PROGRAM	N	Caucasian	African American	Hispanic	Other
12	CHICAGO HCS: West Side	PCT	115	14%	83%	3%	0%
12	HINES	PCT	44	75%	20%	5%	0%
12	MADISON	WSDTT	9	89%	11%	0%	0%
13	BLACK HILLS HCS: Fort Meade	SUPT	103	69%	1%	2%	28%
13	MINNEAPOLIS	PCT	140	83%	11%	1%	4%
13	SIOUX FALLS	PCT	10	80%	0%	0%	20%
14	CENTRAL IA HCS: Knoxville	PCT	30	87%	7%	3%	3%
14	IOWA CITY	PCT	83	95%	2%	1%	1%
14	NE-WESTERN IA HCS: Lincoln	PCT	22	95%	0%	5%	0%
14	NE-WESTERN IA HCS: Omaha	PCT	78	79%	14%	3%	4%
15	EASTERN KS HCS: Topeka	PCT	58	67%	17%	10%	5%
15	KANSAS CITY	PCT	202	75%	21%	3%	1%
15	POPLAR BLUFF	PCT	30	93%	7%	0%	0%
15	ST. LOUIS	PCT	114	66%	25%	4%	5%
15	WICHITA	PCT	91	82%	9%	7%	2%
16	FAYETTEVILLE	PCT	41	88%	0%	0%	12%
16	GULF COAST HCS: Biloxi	PCT	112	67%	31%	2%	0%
16	HOUSTON	PCT	239	48%	36%	15%	0%
16	JACKSON	PCT	79	77%	19%	0%	4%
16	NEW ORLEANS	PCT	94	48%	52%	0%	0%
16	NEW ORLEANS	WSDTT	4	25%	75%	0%	0%
16	OKLAHOMA CITY	PCT	64	66%	20%	3%	11%
17	CENTRAL TX VETERANS HCS: Temple	PCT	385	53%	29%	16%	2%
17	CENTRAL TX VETERANS HCS: Waco	PCT	66	64%	32%	5%	0%
17	NORTH TX HCS: Dallas	PCT	131	66%	26%	8%	1%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	38%	6%	55%	1%
18	EL PASO	PCT	166	36%	4%	57%	3%
18	NM HCS: Albuquerque	PCT	135	46%	1%	47%	6%
18	PHOENIX	PCT	131	73%	6%	15%	5%
18	SOUTHERN AZ HCS: Tucson	PCT	128	75%	7%	14%	4%
19	CHEYENNE	PCT	16	94%	0%	0%	6%
19	GRAND JUNCTION	PCT	45	91%	0%	7%	2%
19	SALT LAKE CITY	PCT	115	83%	3%	10%	4%
20	BOISE	PCT	101	95%	1%	2%	2%
20	PORTLAND	PCT	272	86%	4%	3%	7%
20	PUGET SOUND HCS: American Lake	PCT	202	69%	20%	2%	9%
20	PUGET SOUND HCS: Seattle	PCT	204	83%	8%	3%	5%
20	SPOKANE	PCT	324	90%	2%	2%	6%
21	HONOLULU	PCT	40	40%	13%	8%	40%
21	NORTHERN CA HCS	PCT	60	83%	3%	7%	7%
21	PALO ALTO HCS: San Jose	PCT	45	53%	7%	16%	24%
21	SAN FRANCISCO	PCT	75	65%	17%	11%	7%
21	SAN FRANCISCO	SUPT	26	42%	35%	8%	15%
22	GREATER LOS ANGELES HCS: East LA	PCT	48	19%	15%	46%	21%
22	GREATER LOS ANGELES HCS: West LA	PCT	209	35%	54%	8%	3%
22	LOMA LINDA	PCT	69	55%	23%	20%	1%
22	LOMA LINDA	WSDTT	15	53%	33%	13%	0%
22	SAN DIEGO	PCT	275	67%	12%	12%	9%
TOTAL			10,382				
MEAN			103	66%	22%	7%	4%
S.D.			80	23%	20%	14%	7%

Table 2-12. War-Time Service Eras Among Veterans in Specialized
Outpatient PTSD Programs, by VISN: FY 2001.

VISN	N	World War II	Korea	Vietnam	Persian Gulf
1	659	8%	4%	65%	10%
2	110	4%	5%	69%	9%
3	490	9%	6%	71%	7%
4	231	4%	5%	73%	10%
5	172	2%	4%	84%	8%
6	481	7%	5%	78%	11%
7	1,028	2%	3%	85%	9%
8	655	5%	5%	78%	6%
9	335	6%	4%	84%	6%
10	612	9%	7%	68%	10%
11	313	5%	4%	73%	8%
12	168	4%	1%	89%	2%
13	253	3%	6%	68%	14%
14	213	7%	2%	75%	11%
15	495	8%	6%	77%	7%
16	633	7%	6%	76%	8%
17	833	4%	5%	74%	13%
18	560	7%	8%	74%	11%
19	176	9%	3%	77%	9%
20	1,103	2%	4%	72%	13%
21	246	5%	7%	81%	5%
22	616	5%	5%	75%	7%
TOTAL	10,382				
MEAN	472	6%	5%	76%	9%
S.D.	280	2%	2%	6%	3%

Table 2-13. War-Time Service Eras Among Veterans in Specialized Outpatient PTSD Programs: FY 2001.

VISN	FACILITY	PROGRAM	N	World War II	Korea	Vietnam	Persian Gulf
1	BOSTON HCS: Boston	PCT	88	6%	7%	59%	11%
1	BOSTON HCS: Boston	WSDTT	23	4%	4%	26%	39%
1	BOSTON HCS: Brockton	PCT	73	8%	3%	78%	8%
1	BOSTON HCS: Brockton	SUPT	41	2%	0%	85%	2%
1	CT HCS: West Haven	PCT	124	5%	4%	64%	14%
1	CT HCS: West Haven	SUPT	56	0%	4%	91%	5%
1	MANCHESTER	PCT	30	7%	3%	73%	7%
1	PROVIDENCE	PCT	176	15%	3%	55%	7%
1	WHITE RIVER JUNCTION	PCT	48	13%	10%	58%	10%
2	CANANDAIGUA	PCT	62	3%	6%	53%	13%
2	WESTERN NY HCS: Batavia	PCT	48	4%	2%	90%	4%
3	BRONX	PCT	18	11%	6%	61%	17%
3	NJ HCS: East Orange	PCT	138	9%	5%	73%	3%
3	NY Harbor HCS: Brooklyn	PCT	181	8%	9%	73%	6%
3	NY Harbor HCS: New York	PCT	153	11%	3%	66%	10%
4	COATESVILLE	PCT	31	10%	0%	55%	10%
4	PHILADELPHIA	PCT	88	2%	1%	76%	11%
4	PITTSBURGH HCS: Highland Drive	PCT	66	6%	14%	71%	6%
4	PITTSBURGH HCS: Highland Drive	SUPT	46	0%	2%	83%	11%
5	MD HCS: Baltimore	PCT	13	8%	0%	77%	8%
5	MD HCS: Perry Point	PCT	42	2%	2%	74%	12%
5	WASHINGTON DC	PCT	117	1%	5%	89%	6%
6	ASHEVILLE	PCT	18	6%	0%	83%	11%
6	DURHAM	PCT	113	4%	2%	78%	8%
6	FAYETTEVILLE	PCT	99	12%	8%	80%	13%
6	HAMPTON	PCT	144	5%	4%	77%	13%
6	SALISBURY	PCT	107	7%	8%	75%	8%
7	ATLANTA	PCT	63	0%	0%	94%	6%
7	AUGUSTA	PCT	422	3%	5%	87%	9%
7	BIRMINGHAM	PCT	72	0%	3%	85%	13%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	117	3%	1%	76%	12%
7	CHARLESTON	PCT	92	3%	4%	73%	14%
7	DUBLIN	PCT	216	2%	1%	88%	6%
7	TUSCALOOSA	PCT	46	0%	7%	89%	15%
8	BAY PINES	SUPT	292	6%	5%	79%	5%
8	MIAMI	PCT	68	7%	3%	75%	6%
8	NORTH FL/SOUTH GA HS: Gainesville	PCT	127	6%	4%	76%	6%
8	SAN JUAN	PCT	105	2%	7%	80%	11%
8	TAMPA	PCT	63	3%	3%	73%	5%
9	LEXINGTON	PCT	34	6%	3%	85%	6%
9	LOUISVILLE	PCT	65	2%	3%	88%	8%
9	MEMPHIS	PCT	89	8%	1%	87%	1%
9	MOUNTAIN HOME	PCT	147	6%	7%	82%	9%
10	BRECKSVILLE	PCT	134	18%	9%	62%	7%
10	BRECKSVILLE	WSDTT	3	0%	0%	0%	67%
10	CHILLICOTHE	PCT	173	10%	5%	67%	7%
10	CINCINNATI	PCT	107	2%	6%	64%	19%
10	COLUMBUS	PCT	72	7%	7%	75%	8%
10	DAYTON	PCT	123	7%	9%	77%	9%
11	ANN ARBOR	PCT	40	5%	8%	70%	3%
11	BATTLE CREEK	PCT	71	4%	3%	82%	7%
11	DANVILLE	PCT	137	8%	4%	72%	9%
11	NORTHERN IN HCS: Marion	PCT	65	2%	0%	69%	11%

Table 2-13. War-Time Service Eras Among Veterans in Specialized Outpatient PTSD Programs: FY 2001.

VISN	FACILITY	PROGRAM	N	World War II	Korea	Vietnam	Persian Gulf
12	CHICAGO HCS: West Side	PCT	115	1%	1%	95%	2%
12	HINES	PCT	44	11%	0%	82%	2%
12	MADISON	WSDTT	9	0%	0%	56%	0%
13	BLACK HILLS HCS: Fort Meade	SUPT	103	5%	6%	63%	16%
13	MINNEAPOLIS	PCT	140	2%	6%	71%	14%
13	SIOUX FALLS	PCT	10	0%	0%	70%	10%
14	CENTRAL IA HCS: Knoxville	PCT	30	7%	0%	87%	3%
14	IOWA CITY	PCT	83	10%	4%	70%	10%
14	NE-WESTERN IA HCS: Lincoln	PCT	22	5%	0%	68%	23%
14	NE-WESTERN IA HCS: Omaha	PCT	78	5%	1%	77%	13%
15	EASTERN KS HCS: Topeka	PCT	58	3%	2%	81%	12%
15	KANSAS CITY	PCT	202	11%	8%	75%	3%
15	POPLAR BLUFF	PCT	30	17%	10%	73%	0%
15	ST. LOUIS	PCT	114	4%	4%	89%	6%
15	WICHITA	PCT	91	5%	8%	65%	13%
16	FAYETTEVILLE	PCT	41	12%	12%	76%	2%
16	GULF COAST HCS: Biloxi	PCT	112	6%	8%	87%	3%
16	HOUSTON	PCT	239	3%	4%	75%	11%
16	JACKSON	PCT	79	16%	4%	66%	5%
16	NEW ORLEANS	PCT	94	9%	6%	73%	10%
16	NEW ORLEANS	WSDTT	4	0%	0%	25%	0%
16	OKLAHOMA CITY	PCT	64	6%	6%	77%	11%
17	CENTRAL TX VETERANS HCS: Temple	PCT	385	3%	5%	69%	17%
17	CENTRAL TX VETERANS HCS: Waco	PCT	66	6%	3%	76%	11%
17	NORTH TX HCS: Dallas	PCT	131	7%	4%	82%	4%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	4%	6%	77%	12%
18	EL PASO	PCT	166	11%	14%	72%	12%
18	NM HCS: Albuquerque	PCT	135	4%	10%	73%	13%
18	PHOENIX	PCT	131	5%	2%	85%	6%
18	SOUTHERN AZ HCS: Tucson	PCT	128	8%	5%	66%	13%
19	CHEYENNE	PCT	16	0%	0%	94%	0%
19	GRAND JUNCTION	PCT	45	11%	4%	76%	7%
19	SALT LAKE CITY	PCT	115	6%	2%	78%	14%
20	BOISE	PCT	101	4%	2%	70%	12%
20	PORTLAND	PCT	272	3%	4%	70%	15%
20	PUGET SOUND HCS: American Lake	PCT	202	2%	5%	64%	19%
20	PUGET SOUND HCS: Seattle	PCT	204	1%	3%	76%	13%
20	SPOKANE	PCT	324	2%	3%	76%	8%
21	HONOLULU	PCT	40	0%	10%	78%	10%
21	NORTHERN CA HCS	PCT	60	7%	5%	80%	0%
21	PALO ALTO HCS: San Jose	PCT	45	4%	11%	78%	4%
21	SAN FRANCISCO	PCT	75	9%	8%	79%	8%
21	SAN FRANCISCO	SUPT	26	0%	0%	100%	0%
22	GREATER LOS ANGELES HCS: East LA	PCT	48	19%	10%	63%	4%
22	GREATER LOS ANGELES HCS: West LA	PCT	209	1%	2%	75%	4%
22	LOMA LINDA	PCT	69	1%	7%	88%	3%
22	LOMA LINDA	WSDTT	15	0%	0%	33%	33%
22	SAN DIEGO	PCT	275	5%	5%	76%	9%
TOTAL			10,382				
MEAN			103	5%	4%	74%	10%
S.D.			80	4%	3%	14%	8%

Table 2-14. Traumatic Exposure and Service Connection Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2001.

VISN	N	Exposed to Enemy/ Friendly Fire	Participated In Atrocities	Prisoner of War	Service Connected
1	659	74%	3%	2%	51%
2	110	68%	2%	0%	46%
3	490	84%	3%	3%	51%
4	231	81%	10%	3%	44%
5	172	83%	15%	1%	49%
6	481	84%	5%	4%	52%
7	1,028	90%	11%	2%	64%
8	655	84%	15%	1%	63%
9	335	91%	8%	3%	53%
10	612	87%	6%	2%	56%
11	313	81%	7%	3%	37%
12	168	89%	17%	3%	53%
13	253	71%	8%	2%	57%
14	213	81%	9%	2%	63%
15	495	85%	14%	2%	47%
16	633	83%	12%	2%	52%
17	833	83%	4%	2%	60%
18	560	84%	11%	4%	64%
19	176	84%	8%	4%	57%
20	1,103	71%	8%	1%	59%
21	246	92%	13%	2%	56%
22	616	78%	11%	3%	47%
TOTAL	10,382				
MEAN	472	82%	9%	2%	54%
S.D.	280	6%	4%	1%	7%

Table 2-15. Traumatic Exposure and Service Connection Among Veterans in Specialized Outpatient PTSD Programs: FY 2001.

VISN	FACILITY	PROGRAM	N	Exposed to Enemy/ Friendly Fire	Participated In Atrocities	Prisoner Of War	Service Connected
1	BOSTON HCS: Boston	PCT	88	67%	3%	1%	45%
1	BOSTON HCS: Boston	WSDTT	23	13%	0%	0%	52%
1	BOSTON HCS: Brockton	PCT	73	95%	3%	1%	44%
1	BOSTON HCS: Brockton	SUPT	41	90%	0%	2%	49%
1	CT HCS: West Haven	PCT	124	63%	6%	3%	41%
1	CT HCS: West Haven	SUPT	56	84%	14%	2%	43%
1	MANCHESTER	PCT	30	87%	10%	0%	77%
1	PROVIDENCE	PCT	176	77%	0%	3%	56%
1	WHITE RIVER JUNCTION	PCT	48	65%	0%	2%	71%
2	CANANDAIGUA	PCT	62	56%	3%	0%	34%
2	WESTERN NY HCS: Batavia	PCT	48	83%	0%	0%	63%
3	BRONX	PCT	18	78%	0%	6%	39%
3	NJ HCS: East Orange	PCT	138	78%	1%	4%	57%
3	NY Harbor HCS: Brooklyn	PCT	181	91%	1%	3%	50%
3	NY Harbor HCS: New York	PCT	153	84%	6%	2%	48%
4	COATESVILLE	PCT	31	68%	0%	6%	52%
4	PHILADELPHIA	PCT	88	76%	10%	0%	35%
4	PITTSBURGH HCS: Highland Drive	PCT	66	86%	9%	5%	48%
4	PITTSBURGH HCS: Highland Drive	SUPT	46	89%	17%	2%	50%
5	MD HCS: Baltimore	PCT	13	69%	8%	8%	31%
5	MD HCS: Perry Point	PCT	42	64%	21%	2%	52%
5	WASHINGTON DC	PCT	117	91%	13%	0%	50%
6	ASHEVILLE	PCT	18	100%	6%	0%	39%
6	DURHAM	PCT	113	79%	4%	2%	43%
6	FAYETTEVILLE	PCT	99	86%	14%	1%	76%
6	HAMPTON	PCT	144	82%	3%	6%	46%
6	SALISBURY	PCT	107	87%	2%	6%	50%
7	ATLANTA	PCT	63	83%	2%	8%	71%
7	AUGUSTA	PCT	422	93%	10%	1%	78%
7	BIRMINGHAM	PCT	72	90%	14%	1%	44%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	117	88%	13%	0%	56%
7	CHARLESTON	PCT	92	82%	11%	4%	39%
7	DUBLIN	PCT	216	91%	15%	2%	56%
7	TUSCALOOSA	PCT	46	89%	7%	0%	54%
8	BAY PINES	SUPT	292	87%	8%	2%	61%
8	MIAMI	PCT	68	84%	1%	1%	60%
8	NORTH FL/SOUTH GA HS: Gainesville	PCT	127	86%	34%	0%	65%
8	SAN JUAN	PCT	105	85%	18%	0%	62%
8	TAMPA	PCT	63	68%	13%	3%	68%
9	LEXINGTON	PCT	34	91%	3%	9%	65%
9	LOUISVILLE	PCT	65	83%	17%	0%	42%
9	MEMPHIS	PCT	89	93%	3%	3%	63%
9	MOUNTAIN HOME	PCT	147	93%	7%	3%	50%
10	BRECKSVILLE	PCT	134	93%	7%	4%	56%
10	BRECKSVILLE	WSDTT	3	0%	0%	0%	100%
10	CHILLICOTHE	PCT	173	86%	0%	1%	46%
10	CINCINNATI	PCT	107	82%	12%	1%	50%
10	COLUMBUS	PCT	72	90%	0%	1%	65%
10	DAYTON	PCT	123	85%	10%	4%	67%
11	ANN ARBOR	PCT	40	60%	8%	3%	43%
11	BATTLE CREEK	PCT	71	92%	13%	0%	38%
11	DANVILLE	PCT	137	84%	4%	5%	35%
11	NORTHERN IN HCS: Marion	PCT	65	78%	5%	0%	38%

Table 2-15. Traumatic Exposure and Service Connection Among Veterans in Specialized Outpatient PTSD Programs: FY 2001.

VISN	FACILITY	PROGRAM	N	Exposed to Enemy/ Friendly Fire	Participated In Atrocities	Prisoner Of War	Service Connected
12	CHICAGO HCS: West Side	PCT	115	95%	18%	2%	53%
12	HINES	PCT	44	89%	18%	7%	52%
12	MADISON	WSDTT	9	11%	0%	0%	56%
13	BLACK HILLS HCS: Fort Meade	SUPT	103	65%	13%	4%	46%
13	MINNEAPOLIS	PCT	140	75%	6%	0%	62%
13	SIOUX FALLS	PCT	10	70%	0%	0%	90%
14	CENTRAL IA HCS: Knoxville	PCT	30	87%	0%	0%	70%
14	IOWA CITY	PCT	83	73%	10%	1%	53%
14	NE-WESTERN IA HCS: Lincoln	PCT	22	82%	5%	0%	86%
14	NE-WESTERN IA HCS: Omaha	PCT	78	86%	14%	4%	65%
15	EASTERN KS HCS: Topeka	PCT	58	91%	14%	2%	57%
15	KANSAS CITY	PCT	202	85%	4%	2%	41%
15	POPLAR BLUFF	PCT	30	97%	20%	0%	70%
15	ST. LOUIS	PCT	114	90%	29%	1%	53%
15	WICHITA	PCT	91	70%	13%	2%	42%
16	FAYETTEVILLE	PCT	41	90%	10%	5%	49%
16	GULF COAST HCS: Biloxi	PCT	112	89%	15%	3%	60%
16	HOUSTON	PCT	239	77%	13%	1%	47%
16	JACKSON	PCT	79	84%	5%	3%	67%
16	NEW ORLEANS	PCT	94	93%	16%	2%	44%
16	NEW ORLEANS	WSDTT	4	0%	0%	0%	75%
16	OKLAHOMA CITY	PCT	64	86%	5%	0%	45%
17	CENTRAL TX VETERANS HCS: Temple	PCT	385	78%	0%	2%	62%
17	CENTRAL TX VETERANS HCS: Waco	PCT	66	76%	6%	2%	52%
17	NORTH TX HCS: Dallas	PCT	131	92%	2%	4%	50%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	88%	10%	2%	65%
18	EL PASO	PCT	166	90%	19%	5%	81%
18	NM HCS: Albuquerque	PCT	135	82%	6%	3%	56%
18	PHOENIX	PCT	131	88%	2%	3%	55%
18	SOUTHERN AZ HCS: Tucson	PCT	128	76%	17%	4%	58%
19	CHEYENNE	PCT	16	88%	13%	13%	56%
19	GRAND JUNCTION	PCT	45	84%	13%	4%	69%
19	SALT LAKE CITY	PCT	115	91%	4%	3%	50%
20	BOISE	PCT	101	65%	7%	3%	50%
20	PORTLAND	PCT	272	67%	10%	0%	56%
20	PUGET SOUND HCS: American Lake	PCT	202	71%	5%	3%	60%
20	PUGET SOUND HCS: Seattle	PCT	204	75%	3%	0%	59%
20	SPOKANE	PCT	324	73%	10%	2%	64%
21	HONOLULU	PCT	40	93%	5%	0%	53%
21	NORTHERN CA HCS	PCT	60	87%	18%	8%	52%
21	PALO ALTO HCS: San Jose	PCT	45	87%	9%	0%	56%
21	SAN FRANCISCO	PCT	75	97%	13%	0%	64%
21	SAN FRANCISCO	SUPT	26	96%	19%	0%	46%
22	GREATER LOS ANGELES HCS: East LA	PCT	48	85%	10%	2%	40%
22	GREATER LOS ANGELES HCS: West LA	PCT	209	70%	8%	1%	41%
22	LOMA LINDA	PCT	69	99%	12%	0%	64%
22	LOMA LINDA	WSDTT	15	0%	0%	0%	53%
22	SAN DIEGO	PCT	275	81%	16%	4%	48%
TOTAL			10,382				
MEAN			103	79%	8%	2%	55%
S.D.			80	19%	7%	2%	13%

Table 2-16. Psychotropic Medication and Psychiatric Comorbidities Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2001.

VISN	N	Psychotropic Medication	Axis I Nonpsychotic Disorder	Axis I Psychotic Disorder	Axis II Disorder
1	659	60%	56%	6%	10%
2	110	75%	65%	22%	14%
3	490	48%	31%	6%	6%
4	231	58%	25%	5%	7%
5	172	66%	36%	7%	9%
6	481	70%	41%	4%	3%
7	1028	84%	51%	9%	2%
8	655	77%	34%	8%	14%
9	335	74%	53%	4%	2%
10	612	48%	37%	4%	4%
11	313	65%	43%	4%	8%
12	168	53%	29%	5%	15%
13	253	63%	57%	6%	15%
14	213	76%	61%	5%	18%
15	495	64%	59%	8%	9%
16	633	64%	68%	4%	11%
17	833	71%	38%	7%	2%
18	560	61%	44%	4%	6%
19	176	52%	49%	5%	14%
20	1103	75%	63%	9%	10%
21	246	49%	47%	3%	8%
22	616	60%	47%	10%	3%
TOTAL	10,382				
MEAN	472	64%	47%	7%	9%
S.D.	280	10%	13%	4%	5%

Table 2-17. Psychotropic Medication and Psychiatric Comorbidities Among Veterans in Specialized Outpatient PTSD Programs: FY 2001.

VISN	FACILITY	PROGRAM	N	Psychotropic Medication	Axis I Nonpsychotic Disorder	Axis I Psychotic Disorder	Axis II Personality Disorder
1	BOSTON HCS: Boston	PCT	88	61%	60%	6%	17%
1	BOSTON HCS: Boston	WSDTT	23	39%	100%	8%	9%
1	BOSTON HCS: Brockton	PCT	73	64%	15%	7%	0%
1	BOSTON HCS: Brockton	SUPT	41	54%	8%	5%	41%
1	CT HCS: West Haven	PCT	124	50%	56%	7%	4%
1	CT HCS: West Haven	SUPT	56	63%	43%	6%	11%
1	MANCHESTER	PCT	30	60%	73%	3%	13%
1	PROVIDENCE	PCT	176	67%	81%	4%	6%
1	WHITE RIVER JUNCTION	PCT	48	65%	48%	8%	15%
2	CANANDAIGUA	PCT	62	79%	66%	33%	8%
2	WESTERN NY HCS: Batavia	PCT	48	71%	65%	8%	21%
3	BRONX	PCT	18	33%	11%	6%	22%
3	NJ HCS: East Orange	PCT	138	49%	52%	8%	1%
3	NY Harbor HCS: Brooklyn	PCT	181	44%	28%	3%	4%
3	NY Harbor HCS: New York	PCT	153	55%	29%	8%	10%
4	COATESVILLE	PCT	31	90%	19%	3%	13%
4	PHILADELPHIA	PCT	88	60%	44%	9%	7%
4	PITTSBURGH HCS: Highland Drive	PCT	66	36%	14%	3%	8%
4	PITTSBURGH HCS: Highland Drive	SUPT	46	62%	13%	2%	2%
5	MD HCS: Baltimore	PCT	13	8%	92%	0%	0%
5	MD HCS: Perry Point	PCT	42	88%	41%	20%	36%
5	WASHINGTON DC	PCT	117	66%	27%	3%	1%
6	ASHEVILLE	PCT	18	94%	61%	0%	6%
6	DURHAM	PCT	113	60%	77%	5%	2%
6	FAYETTEVILLE	PCT	99	95%	47%	2%	4%
6	HAMPTON	PCT	144	62%	19%	5%	3%
6	SALISBURY	PCT	107	65%	26%	5%	3%
7	ATLANTA	PCT	63	79%	35%	2%	0%
7	AUGUSTA	PCT	422	90%	81%	10%	1%
7	BIRMINGHAM	PCT	72	79%	21%	7%	3%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	117	78%	13%	18%	3%
7	CHARLESTON	PCT	92	54%	67%	5%	2%
7	DUBLIN	PCT	216	90%	33%	6%	0%
7	TUSCALOOSA	PCT	46	77%	2%	7%	2%
8	BAY PINES	SUPT	292	78%	28%	12%	17%
8	MIAMI	PCT	68	64%	35%	6%	3%
8	NORTH FL/SOUTH GA HS: Gainesville	PCT	127	75%	17%	2%	18%
8	SAN JUAN	PCT	105	86%	37%	6%	2%
8	TAMPA	PCT	63	75%	84%	10%	27%
9	LEXINGTON	PCT	34	66%	12%	0%	0%
9	LOUISVILLE	PCT	65	89%	5%	2%	0%
9	MEMPHIS	PCT	89	70%	84%	7%	3%
9	MOUNTAIN HOME	PCT	147	72%	66%	5%	2%
10	BRECKSVILLE	PCT	134	52%	30%	2%	4%
10	BRECKSVILLE	WSDTT	3	100%	100%	0%	0%
10	CHILLICOTHE	PCT	173	19%	4%	1%	1%
10	CINCINNATI	PCT	107	43%	58%	9%	9%
10	COLUMBUS	PCT	72	68%	39%	3%	1%
10	DAYTON	PCT	123	76%	69%	7%	3%
11	ANN ARBOR	PCT	40	70%	73%	3%	20%
11	BATTLE CREEK	PCT	71	65%	14%	7%	3%
11	DANVILLE	PCT	137	59%	68%	3%	6%
11	NORTHERN IN HCS: Marion	PCT	65	77%	3%	2%	9%

Table 2-17. Psychotropic Medication and Psychiatric Comorbidities Among Veterans in Specialized Outpatient PTSD Programs: FY 2001.

VISN	FACILITY	PROGRAM	N	Psychotropic Medication	Axis I Nonpsychotic Disorder	Axis I Psychotic Disorder	Axis II Personality Disorder
12	CHICAGO HCS: West Side	PCT	115	49%	22%	6%	7%
12	HINES	PCT	44	55%	35%	5%	34%
12	MADISON	WSDTT	9	100%	88%	0%	33%
13	BLACK HILLS HCS: Fort Meade	SUPT	103	62%	37%	8%	11%
13	MINNEAPOLIS	PCT	140	64%	75%	5%	17%
13	SIOUX FALLS	PCT	10	60%	30%	10%	30%
14	CENTRAL IA HCS: Knoxville	PCT	30	87%	7%	7%	3%
14	IOWA CITY	PCT	83	69%	54%	3%	14%
14	NE-WESTERN IA HCS: Lincoln	PCT	22	86%	55%	5%	0%
14	NE-WESTERN IA HCS: Omaha	PCT	78	76%	91%	6%	33%
15	EASTERN KS HCS: Topeka	PCT	58	74%	79%	16%	5%
15	KANSAS CITY	PCT	202	68%	89%	14%	19%
15	POPLAR BLUFF	PCT	30	97%	20%	0%	0%
15	ST. LOUIS	PCT	114	50%	0%	1%	0%
15	WICHITA	PCT	91	55%	68%	2%	2%
16	FAYETTEVILLE	PCT	41	82%	51%	2%	12%
16	GULF COAST HCS: Biloxi	PCT	112	67%	82%	7%	4%
16	HOUSTON	PCT	239	63%	79%	4%	18%
16	JACKSON	PCT	79	78%	24%	1%	14%
16	NEW ORLEANS	PCT	94	54%	72%	6%	3%
16	NEW ORLEANS	WSDTT	4	100%	100%	25%	0%
16	OKLAHOMA CITY	PCT	64	49%	27%	0%	0%
17	CENTRAL TX VETERANS HCS: Temple	PCT	385	72%	16%	10%	1%
17	CENTRAL TX VETERANS HCS: Waco	PCT	66	69%	27%	13%	8%
17	NORTH TX HCS: Dallas	PCT	131	76%	94%	3%	0%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	66%	45%	5%	4%
18	EL PASO	PCT	166	59%	33%	7%	7%
18	NM HCS: Albuquerque	PCT	135	60%	48%	1%	10%
18	PHOENIX	PCT	131	71%	76%	5%	5%
18	SOUTHERN AZ HCS: Tucson	PCT	128	56%	21%	4%	5%
19	CHEYENNE	PCT	16	81%	31%	13%	25%
19	GRAND JUNCTION	PCT	45	82%	93%	9%	36%
19	SALT LAKE CITY	PCT	115	30%	52%	2%	10%
20	BOISE	PCT	101	73%	59%	7%	9%
20	PORTLAND	PCT	272	81%	55%	18%	16%
20	PUGET SOUND HCS: American Lake	PCT	202	71%	57%	7%	3%
20	PUGET SOUND HCS: Seattle	PCT	204	73%	49%	8%	3%
20	SPOKANE	PCT	324	75%	82%	5%	15%
21	HONOLULU	PCT	40	33%	22%	5%	13%
21	NORTHERN CA HCS	PCT	60	63%	79%	2%	8%
21	PALO ALTO HCS: San Jose	PCT	45	64%	62%	2%	2%
21	SAN FRANCISCO	PCT	75	40%	31%	1%	4%
21	SAN FRANCISCO	SUPT	26	46%	35%	8%	23%
22	GREATER LOS ANGELES HCS: East LA	PCT	48	33%	63%	2%	10%
22	GREATER LOS ANGELES HCS: West LA	PCT	209	62%	34%	16%	3%
22	LOMA LINDA	PCT	69	82%	45%	6%	3%
22	LOMA LINDA	WSDTT	15	80%	67%	27%	7%
22	SAN DIEGO	PCT	275	52%	53%	9%	2%
TOTAL			10,382				
MEAN			103	66%	48%	6%	9%
S.D.			80	17%	27%	6%	10%

Table 2-18. Referral Sources Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2001.

VISN	N	VAMC Program	RCS Vet Center	Self-Referred	Other Referral
1	659	68%	5%	15%	12%
2	110	55%	1%	14%	29%
3	490	71%	1%	23%	4%
4	231	62%	13%	22%	4%
5	172	92%	1%	5%	2%
6	481	86%	7%	5%	2%
7	1028	65%	12%	19%	4%
8	655	93%	1%	5%	1%
9	335	90%	4%	5%	1%
10	612	72%	2%	15%	11%
11	313	67%	1%	18%	14%
12	168	71%	6%	19%	4%
13	253	87%	1%	6%	6%
14	213	79%	5%	13%	3%
15	495	72%	8%	17%	2%
16	633	72%	8%	12%	7%
17	833	87%	5%	5%	2%
18	560	78%	3%	16%	2%
19	176	57%	5%	32%	7%
20	1103	77%	5%	13%	4%
21	246	58%	7%	28%	6%
22	616	74%	11%	8%	2%
TOTAL	10,382				
MEAN	472	74%	5%	14%	6%
S.D.	280	11%	4%	8%	6%

Table 2-19. Referral Sources Among Veterans in Specialized Outpatient PTSD Programs: FY 2001.

VISN	FACILITY	PROGRAM	N	VAMC Program	RCS Vet Center	Self-Referred	Other Referral
1	BOSTON HCS: Boston	PCT	88	55%	10%	30%	6%
1	BOSTON HCS: Boston	WSDTT	23	65%	0%	0%	35%
1	BOSTON HCS: Brockton	PCT	73	47%	7%	4%	42%
1	BOSTON HCS: Brockton	SUPT	41	46%	0%	15%	39%
1	CT HCS: West Haven	PCT	124	53%	9%	29%	9%
1	CT HCS: West Haven	SUPT	56	46%	9%	32%	11%
1	MANCHESTER	PCT	30	87%	0%	13%	0%
1	PROVIDENCE	PCT	176	99%	0%	1%	0%
1	WHITE RIVER JUNCTION	PCT	48	81%	4%	10%	4%
2	CANANDAIGUA	PCT	62	44%	2%	5%	50%
2	WESTERN NY HCS: Batavia	PCT	48	71%	0%	25%	2%
3	BRONX	PCT	18	94%	6%	0%	0%
3	NJ HCS: East Orange	PCT	138	67%	0%	33%	1%
3	NY Harbor HCS: Brooklyn	PCT	181	70%	3%	23%	4%
3	NY Harbor HCS: New York	PCT	153	75%	1%	18%	6%
4	COATESVILLE	PCT	31	74%	3%	16%	6%
4	PHILADELPHIA	PCT	88	73%	7%	19%	1%
4	PITTSBURGH HCS: Highland Drive	PCT	66	42%	14%	38%	6%
4	PITTSBURGH HCS: Highland Drive	SUPT	46	61%	28%	7%	4%
5	MD HCS: Baltimore	PCT	13	85%	0%	0%	15%
5	MD HCS: Perry Point	PCT	42	76%	2%	19%	2%
5	WASHINGTON DC	PCT	117	98%	1%	1%	0%
6	ASHEVILLE	PCT	18	100%	0%	0%	0%
6	DURHAM	PCT	113	53%	22%	19%	5%
6	FAYETTEVILLE	PCT	99	91%	4%	3%	2%
6	HAMPTON	PCT	144	97%	1%	1%	1%
6	SALISBURY	PCT	107	98%	2%	0%	0%
7	ATLANTA	PCT	63	98%	2%	0%	0%
7	AUGUSTA	PCT	422	45%	19%	30%	5%
7	BIRMINGHAM	PCT	72	78%	8%	13%	1%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	117	74%	5%	20%	2%
7	CHARLESTON	PCT	92	88%	5%	4%	1%
7	DUBLIN	PCT	216	78%	11%	8%	4%
7	TUSCALOOSA	PCT	46	48%	11%	33%	7%
8	BAY PINES	SUPT	292	93%	1%	5%	1%
8	MIAMI	PCT	68	99%	1%	0%	0%
8	NORTH FL/SOUTH GA HS: Gainesville	PCT	127	93%	0%	6%	1%
8	SAN JUAN	PCT	105	96%	3%	1%	0%
8	TAMPA	PCT	63	83%	3%	11%	2%
9	LEXINGTON	PCT	34	88%	0%	9%	3%
9	LOUISVILLE	PCT	65	98%	0%	2%	0%
9	MEMPHIS	PCT	89	80%	4%	12%	3%
9	MOUNTAIN HOME	PCT	147	92%	6%	1%	1%
10	BRECKSVILLE	PCT	134	68%	0%	31%	1%
10	BRECKSVILLE	WSDTT	3	100%	0%	0%	0%
10	CHILLICOTHE	PCT	173	75%	0%	1%	25%
10	CINCINNATI	PCT	107	56%	5%	24%	13%
10	COLUMBUS	PCT	72	85%	1%	13%	1%
10	DAYTON	PCT	123	78%	7%	11%	4%
11	ANN ARBOR	PCT	40	70%	3%	28%	0%
11	BATTLE CREEK	PCT	71	75%	0%	23%	3%
11	DANVILLE	PCT	137	61%	1%	13%	25%
11	NORTHERN IN HCS: Marion	PCT	65	72%	0%	17%	11%

Table 2-19. Referral Sources Among Veterans in Specialized Outpatient PTSD Programs: FY 2001.

VISN	FACILITY	PROGRAM	N	VAMC Program	RCS Vet Center	Self-Referred	Other Referral
12	CHICAGO HCS: West Side	PCT	115	73%	3%	22%	1%
12	HINES	PCT	44	64%	9%	16%	11%
12	MADISON	WSDTT	9	78%	22%	0%	0%
13	BLACK HILLS HCS: Fort Meade	SUPT	103	75%	2%	11%	13%
13	MINNEAPOLIS	PCT	140	97%	1%	1%	1%
13	SIOUX FALLS	PCT	10	80%	0%	10%	0%
14	CENTRAL IA HCS: Knoxville	PCT	30	90%	3%	7%	0%
14	IOWA CITY	PCT	83	72%	5%	19%	4%
14	NE-WESTERN IA HCS: Lincoln	PCT	22	45%	9%	32%	14%
14	NE-WESTERN IA HCS: Omaha	PCT	78	92%	4%	3%	1%
15	EASTERN KS HCS: Topeka	PCT	58	95%	2%	3%	0%
15	KANSAS CITY	PCT	202	63%	7%	27%	2%
15	POPLAR BLUFF	PCT	30	100%	0%	0%	0%
15	ST. LOUIS	PCT	114	77%	18%	4%	0%
15	WICHITA	PCT	91	63%	7%	24%	5%
16	FAYETTEVILLE	PCT	41	80%	0%	15%	5%
16	GULF COAST HCS: Biloxi	PCT	112	46%	29%	8%	17%
16	HOUSTON	PCT	239	90%	5%	3%	1%
16	JACKSON	PCT	79	81%	5%	14%	0%
16	NEW ORLEANS	PCT	94	51%	2%	32%	14%
16	NEW ORLEANS	WSDTT	4	100%	0%	0%	0%
16	OKLAHOMA CITY	PCT	64	66%	3%	22%	9%
17	CENTRAL TX VETERANS HCS: Temple	PCT	385	87%	6%	7%	1%
17	CENTRAL TX VETERANS HCS: Waco	PCT	66	91%	0%	2%	0%
17	NORTH TX HCS: Dallas	PCT	131	79%	3%	7%	11%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	90%	6%	2%	2%
18	EL PASO	PCT	166	58%	6%	30%	5%
18	NM HCS: Albuquerque	PCT	135	90%	4%	4%	1%
18	PHOENIX	PCT	131	73%	2%	21%	2%
18	SOUTHERN AZ HCS: Tucson	PCT	128	95%	0%	5%	0%
19	CHEYENNE	PCT	16	81%	0%	13%	6%
19	GRAND JUNCTION	PCT	45	69%	0%	31%	0%
19	SALT LAKE CITY	PCT	115	47%	4%	37%	11%
20	BOISE	PCT	101	93%	1%	4%	2%
20	PORTLAND	PCT	272	71%	14%	7%	3%
20	PUGET SOUND HCS: American Lake	PCT	202	85%	4%	8%	2%
20	PUGET SOUND HCS: Seattle	PCT	204	81%	2%	13%	4%
20	SPOKANE	PCT	324	69%	2%	24%	5%
21	HONOLULU	PCT	40	68%	3%	23%	8%
21	NORTHERN CA HCS	PCT	60	48%	5%	37%	10%
21	PALO ALTO HCS: San Jose	PCT	45	49%	16%	31%	4%
21	SAN FRANCISCO	PCT	75	63%	9%	23%	5%
21	SAN FRANCISCO	SUPT	26	65%	0%	31%	0%
22	GREATER LOS ANGELES HCS: East LA	PCT	48	46%	33%	13%	8%
22	GREATER LOS ANGELES HCS: West LA	PCT	209	83%	2%	11%	2%
22	LOMA LINDA	PCT	69	87%	7%	4%	1%
22	LOMA LINDA	WSDTT	15	87%	0%	13%	0%
22	SAN DIEGO	PCT	275	69%	17%	4%	2%
TOTAL			10,382				
MEAN			103	75%	5%	13%	6%
S.D.			80	17%	7%	11%	9%

Table 2-20. Medical Status, Incarceration, Sexual and Noncombat Trauma
Among Veterans in Specialized Outpatient PTSD Programs, by VISN, FY 2001.

VISN	N	Chronic Medical Problem (Current)	Incarcerated >2 Weeks (Lifetime)	PTSD Due to Sexual Trauma	PTSD Due to Noncombat Nonsexual Trauma
1	659	74%	15%	6%	11%
2	110	57%	16%	8%	18%
3	490	74%	13%	2%	6%
4	231	74%	15%	15%	16%
5	172	71%	26%	1%	2%
6	481	77%	17%	4%	11%
7	1028	72%	21%	2%	14%
8	655	79%	14%	4%	8%
9	335	73%	16%	1%	4%
10	612	84%	13%	9%	15%
11	313	66%	18%	2%	5%
12	168	80%	27%	6%	8%
13	253	66%	23%	5%	15%
14	213	75%	13%	10%	16%
15	495	76%	21%	2%	4%
16	633	76%	17%	3%	5%
17	833	75%	21%	5%	5%
18	560	78%	11%	5%	9%
19	176	74%	10%	5%	7%
20	1103	74%	17%	13%	16%
21	246	71%	15%	2%	4%
22	616	80%	28%	8%	18%
TOTAL	10,382				
MEAN	472	74%	18%	5%	10%
S.D.	280	6%	5%	4%	5%

Table 2-21. Medical Status and Incarceration Among Veterans in Specialized Outpatient PTSD Programs, FY 2001.

VISN	FACILITY	PROGRAM	N	Chronic Medical Problem (Current)	Incarcerated >2 Weeks (Lifetime)	Sexual Trauma P73	Noncombat Nonsexual Trauma
1	BOSTON HCS: Boston	PCT	88	76%	18%	4%	25%
1	BOSTON HCS: Boston	WSDTT	23	61%	4%	27%	25%
1	BOSTON HCS: Brockton	PCT	73	72%	15%	0%	3%
1	BOSTON HCS: Brockton	SUPT	41	83%	17%	5%	2%
1	CT HCS: West Haven	PCT	124	68%	11%	2%	12%
1	CT HCS: West Haven	SUPT	56	71%	38%	4%	4%
1	MANCHESTER	PCT	30	41%	0%	3%	10%
1	PROVIDENCE	PCT	176	84%	14%	6%	6%
1	WHITE RIVER JUNCTION	PCT	48	79%	4%	19%	33%
2	CANANDAIGUA	PCT	62	65%	27%	11%	33%
2	WESTERN NY HCS: Batavia	PCT	48	48%	2%	4%	0%
3	BRONX	PCT	18	78%	28%	0%	6%
3	NJ HCS: East Orange	PCT	138	67%	9%	1%	0%
3	NY Harbor HCS: Brooklyn	PCT	181	82%	8%	2%	9%
3	NY Harbor HCS: New York	PCT	153	70%	21%	4%	8%
4	COATESVILLE	PCT	31	71%	19%	58%	58%
4	PHILADELPHIA	PCT	88	82%	11%	15%	8%
4	PITTSBURGH HCS: Highland Drive	PCT	66	77%	9%	2%	8%
4	PITTSBURGH HCS: Highland Drive	SUPT	46	56%	26%	4%	13%
5	MD HCS: Baltimore	PCT	13	38%	0%	0%	0%
5	MD HCS: Perry Point	PCT	42	80%	21%	2%	7%
5	WASHINGTON DC	PCT	117	72%	30%	0%	1%
6	ASHEVILLE	PCT	18	94%	0%	0%	0%
6	DURHAM	PCT	113	65%	21%	4%	13%
6	FAYETTEVILLE	PCT	99	84%	9%	5%	1%
6	HAMPTON	PCT	144	88%	20%	5%	19%
6	SALISBURY	PCT	107	65%	20%	2%	8%
7	ATLANTA	PCT	63	89%	27%	0%	2%
7	AUGUSTA	PCT	422	70%	21%	2%	20%
7	BIRMINGHAM	PCT	72	77%	14%	3%	7%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	117	68%	24%	2%	19%
7	CHARLESTON	PCT	92	78%	9%	0%	3%
7	DUBLIN	PCT	216	68%	24%	4%	13%
7	TUSCALOOSA	PCT	46	73%	20%	0%	11%
8	BAY PINES	SUPT	292	79%	19%	1%	6%
8	MIAMI	PCT	68	81%	25%	1%	7%
8	NORTH FL/SOUTH GA HS: Gainesville	PCT	127	83%	9%	7%	17%
8	SAN JUAN	PCT	105	76%	2%	4%	6%
8	TAMPA	PCT	63	73%	8%	10%	5%
9	LEXINGTON	PCT	34	82%	12%	3%	0%
9	LOUISVILLE	PCT	65	41%	17%	2%	2%
9	MEMPHIS	PCT	89	67%	19%	1%	1%
9	MOUNTAIN HOME	PCT	147	89%	14%	1%	9%
10	BRECKSVILLE	PCT	134	87%	16%	4%	5%
10	BRECKSVILLE	WSDTT	3	67%	0%	67%	33%
10	CHILLICOTHE	PCT	173	94%	2%	1%	13%
10	CINCINNATI	PCT	107	79%	25%	14%	13%
10	COLUMBUS	PCT	72	64%	6%	42%	39%
10	DAYTON	PCT	123	82%	20%	2%	15%
11	ANN ARBOR	PCT	40	74%	20%	3%	15%
11	BATTLE CREEK	PCT	71	57%	37%	4%	1%
11	DANVILLE	PCT	137	69%	9%	0%	2%
11	NORTHERN IN HCS: Marion	PCT	65	65%	12%	2%	8%

Table 2-21. Medical Status and Incarceration Among Veterans in Specialized Outpatient PTSD Programs, FY 2001.

VISN	FACILITY	PROGRAM	N	Chronic Medical Problem (Current)	Incarcerated >2 Weeks (Lifetime)	Sexual Trauma P73	Noncombat Nonsexual Trauma
12	CHICAGO HCS: West Side	PCT	115	79%	31%	3%	3%
12	HINES	PCT	44	83%	18%	0%	23%
12	MADISON	WSDTT	9	78%	11%	88%	11%
13	BLACK HILLS HCS: Fort Meade	SUPT	103	66%	31%	7%	25%
13	MINNEAPOLIS	PCT	140	65%	17%	4%	8%
13	SIOUX FALLS	PCT	10	80%	10%	0%	0%
14	CENTRAL IA HCS: Knoxville	PCT	30	43%	10%	3%	0%
14	IOWA CITY	PCT	83	80%	11%	12%	20%
14	NE-WESTERN IA HCS: Lincoln	PCT	22	68%	9%	9%	5%
14	NE-WESTERN IA HCS: Omaha	PCT	78	85%	18%	11%	22%
15	EASTERN KS HCS: Topeka	PCT	58	81%	22%	0%	9%
15	KANSAS CITY	PCT	202	89%	20%	1%	1%
15	POPLAR BLUFF	PCT	30	87%	10%	7%	10%
15	ST. LOUIS	PCT	114	69%	23%	1%	2%
15	WICHITA	PCT	91	48%	21%	4%	8%
16	FAYETTEVILLE	PCT	41	95%	12%	2%	2%
16	GULF COAST HCS: Biloxi	PCT	112	90%	16%	2%	11%
16	HOUSTON	PCT	239	70%	18%	3%	4%
16	JACKSON	PCT	79	78%	10%	6%	0%
16	NEW ORLEANS	PCT	94	69%	22%	1%	3%
16	NEW ORLEANS	WSDTT	4	67%	0%	0%	100%
16	OKLAHOMA CITY	PCT	64	76%	19%	2%	5%
17	CENTRAL TX VETERANS HCS: Temple	PCT	385	73%	27%	8%	3%
17	CENTRAL TX VETERANS HCS: Waco	PCT	66	69%	24%	4%	15%
17	NORTH TX HCS: Dallas	PCT	131	70%	21%	2%	2%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	251	80%	10%	4%	8%
18	EL PASO	PCT	166	84%	14%	7%	6%
18	NM HCS: Albuquerque	PCT	135	69%	5%	4%	14%
18	PHOENIX	PCT	131	84%	8%	1%	2%
18	SOUTHERN AZ HCS: Tucson	PCT	128	74%	18%	8%	16%
19	CHEYENNE	PCT	16	94%	25%	13%	0%
19	GRAND JUNCTION	PCT	45	73%	16%	4%	7%
19	SALT LAKE CITY	PCT	115	68%	10%	3%	8%
20	BOISE	PCT	101	77%	10%	2%	4%
20	PORTLAND	PCT	272	68%	20%	10%	17%
20	PUGET SOUND HCS: American Lake	PCT	202	72%	17%	19%	22%
20	PUGET SOUND HCS: Seattle	PCT	204	77%	21%	14%	19%
20	SPOKANE	PCT	324	76%	13%	14%	12%
21	HONOLULU	PCT	40	59%	13%	3%	0%
21	NORTHERN CA HCS	PCT	60	84%	12%	2%	2%
21	PALO ALTO HCS: San Jose	PCT	45	73%	18%	4%	4%
21	SAN FRANCISCO	PCT	75	69%	16%	1%	5%
21	SAN FRANCISCO	SUPT	26	58%	23%	0%	12%
22	GREATER LOS ANGELES HCS: East LA	PCT	48	85%	31%	13%	0%
22	GREATER LOS ANGELES HCS: West LA	PCT	209	78%	40%	6%	34%
22	LOMA LINDA	PCT	69	75%	28%	1%	0%
22	LOMA LINDA	WSDTT	15	87%	7%	73%	13%
22	SAN DIEGO	PCT	275	81%	24%	8%	15%
TOTAL			10,382				
MEAN			103	74%	16%	8%	11%
S.D.			80	12%	9%	15%	13%

PART III: PROGRAMMATIC CAPACITY

Part III presents tables for the workload, staffing and costs for FY 2001 of both the Specialized Outpatient PTSD Programs (SOPPs) and the Specialized Intensive PTSD Programs (SIPPs). In addition, the changes from FY 1996, FY 1997, and FY1998 are presented for selected variables. Tracking of changes in administrative operation annually permits an examination of the shifting of programmatic capacity due to the reallocation of resources and/or the restructuring of clinical services. The data are presented at the VISN and individual program levels for the SOPPs, and at the VISN and facility levels for the SIPPs. Because programmatic changes continue to take place for a large number of SIPPs, it is difficult to present representative data for individual SIPPs over time. For this reason, we have shifted our approach to presenting aggregated data representing all intensive programs at a facility for workload, staffing, and costs.

Specialized PTSD Programs

Program types comprising the SOPPs are the PTSD Clinical Team (PCT), the Substance Use and PTSD Team (SUPT) and the Women's Stress Disorder Treatment Team (WSDTT). These program types are organized around the model of an ambulatory clinic. Veterans typically come in for services with an upper limit of approximately two times a week for one or two clinical contacts each time.

For SIPPs, program types include the Evaluation and Brief Treatment Unit (EBTPU), the PTSD Domiciliary (PTSD Dom) (replaced the PTSD and Substance Abuse Unit/PSU), the PTSD Residential Rehabilitation Program (PRRP), the Specialized Inpatient PTSD Unit (SIPU), and the Women's Trauma Recovery Program (WTRP). Also included, as an intensive program, is the PTSD Day Hospital (DH). PTSD Day Hospitals are outpatient in nature but involve coming in for services either on a daily basis or several times a week in which the clinical contacts are of four to eight hours duration. The DHsa is a dual-diagnosis PTSD Day Hospital with a substance abuse component.

Sources of Data

At the end of each fiscal year, the Northeast Program Evaluation Center (NEPEC) conducts a survey of all VA facilities with specialized PTSD programs asking for information concerning the workload, the FTEE and the expenditures for each program. This survey is called the *Specialized PTSD Programs Annual Report*. In FY 1997 the Annual Report was expanded to include a comprehensive assessment of all nursing staff as part of the total FTEE accounting for each intensive program. For this reason, FY 1997 is generally used as the base year for all differences computed for intensive programs. The only exception to this procedure is when FY 1997 data are not reported. For those situations, FY 1998 data are used, as noted in the affected tables. For outpatient programs, differences are calculated between FY 1996 and FY 2001.

For SOPPs, the number of veterans seen, the number of veterans treated and the number of outpatient visits are derived from the stop code data that are obtained from the Austin Data Processing Center in Austin, Texas. Veterans *seen* include all veterans receiving services, while veterans *treated* include only those seen more than once. *New veterans treated* are those who were not seen in the previous fiscal year. For SIPPs, the number of veterans admitted and the number of bed days are obtained from the Annual Report.

Workload for SOPPs

Workload data for the SOPPs are presented by VISN in Table 3-1 and by individual program in Table 3-2. Differences from FY 1996 to FY 2001 are presented for number of visits, number of veterans seen, number of veterans treated and the percent of new veterans treated. Table 3-1 presents the unique number of veterans seen, the unique number of veterans treated, and the unique number of new veterans by VISN and nationally for FY 2001. As explained in Part I, these data were presented in years prior to 2001 as the sum of the individual programs. This allowed for a duplicated count of veterans. For FY 2001 and beyond, it was decided that these data would be presented as unduplicated counts of veterans, which are determined for the VA as a total system as "ALL VA", and as totals for the columns in the tables as "SUM". The number of visits, the number of veterans seen, and the number of veterans treated represent *Gross Output*. *Productivity* is represented by two indices. One index is the number of visits per filled FTEE. This index is relevant to the standard of 1000 visits per FTEE that was the operative standard in VA prior to the adoption of the Special Emphasis Program (SEP) goals as specified in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*. The other index, the number of veterans treated per filled FTEE, is relevant to the SEP goal of 75 veterans treated per FTEE. VISNs and individual programs not meeting these targets are boxed in the tables. Nationally for FY 2001, the total number of visits for ALL VA was 563,150, the total number of veterans seen was 57,783, and the total number of veterans treated was 44,300. The percent of veterans treated who were new was 32% (see Table 3-1).

Workload for SIPPs

Workload data for the SIPPs can be found by VISN in Table 3-3 and by individual VA facility in Table 3-4. For each VA facility, the total number of admissions (episodes) to all programs and the total days of treatment represent *gross output*. *Efficiency* is represented by the length of program or the number of days of treatment per admission. It is calculated as the ratio of days of treatment to admissions for all intensive programs except PTSD Days Hospitals, for which length of program is the number of days from admission to discharge from the program. Total days of treatment, for programs other than PTSD Day Hospitals, is equal to the bed days of care reported on the Annual Report. For PTSD Day Hospitals, days of treatment are represented by the number of stop code visits accrued for the fiscal year. Total days of treatment for PTSD Day Hospitals is generally less than the actual number of days spent in the program. This is due to the fact that PTSD Day Hospitals do not provide treatment seven days a week.

Differences are presented for each variable. Across all VISNs for FY 2001, the total number of admissions was 5012 and the total number of days of treatment was 182,126 (see Table 3-3).

Staffing of the SOPPs

Staffing of the SOPPs, represented as filled FTEE, and the change in staffing levels between FY 1996 and FY 2001 are presented by VISN in Table 3-5 and by individual program in Table 3-6. Filled FTEE is calculated from the data supplied from the Annual Report. [See Appendix C.] A total of 487.11 FTEE were filled for FY 2001. Although there was substantial shifting within individual programs, staffing levels have remained fairly constant nationally with an increase of 65.69 FTEE.

Staffing of the SIPPs

Staffing of the SIPPs and the change in staffing levels are presented by VISN in Table 3-7 and by individual VA facility in Table 3-8. Overall, there were 341.26 FTEE filled for FY 2001. In FY 2001 there were a number of programmatic changes within the SIPPs. Several VA facilities reconfigured inpatient units to PRRPs, PTSD Doms and PTSD Day Hospitals. Adjustments in staffing levels accompanied these changes. Because of this movement within the system, SIPP FTEE experienced a substantial drop of 255.15 FTEE throughout all VA over the period from FY 1997 through FY 2001.

Costs of the SOPPS

The direct costs for the SOPPs are presented in Table 3-9 by VISN and in Table 3-10 by individual program. Direct costs are calculated by using filled FTEE and expenditure data supplied from the Annual Report. [See Appendix C.] The *cost-efficiency* of the programs is represented by two indices: cost per visit and cost per capita. The former is calculated as the ratio of direct costs to number of visits, and the latter is calculated as the ratio of direct costs to number of veterans treated. In addition, differences between FY 2001 and FY 1996 are presented for cost per visit, cost per capita and direct costs. Nationwide in FY 2001, the SOPPs treated a total of 44,300 veterans with 563,150 visits at an overall direct cost of \$42,924,372. The average cost per visit was \$76, a decrease of \$5, and the average cost per capita was \$969, a decrease of \$215.

Costs of the SIPPS

The direct costs for the SIPPs are presented by VISN in Table 3-11 and by individual VA facility in Table 3-12. The *cost-efficiency* of the programs is represented by two indices: cost per diem and cost per capita. The former is calculated as the ratio of direct costs to number of days of treatment, and the latter is calculated as the ratio of direct costs to number of veterans admitted. The differences in costs are also calculated. Nationwide in FY 2001, the SIPPs admitted a total of 5012 veterans with 182,126 days of treatment at an overall direct cost of \$23,450,173. The average cost per diem was \$129, a decrease of \$22, and the average cost per capita was \$4,679 a decrease of \$1,080.

Table 3-1. Workload for Specialized Outpatient PTSD Programs, by VISN.†

VISN	FY 2001			DIFF: FY 2001 - FY 1996			FY 2001			FY 2001		DIFF: FY 2001 - 1996
	# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED/ VETS TREATED (%)	# NEW VETS TREATED/ VETS TREATED (%)
1	44885	4125	3232	9622	850	851	33.60	1336	96	1019	32%	-8%
2	10532	1003	731	3281	480	313	8.00	1317	91	216	30%	6%
3	36252	2613	2051	15055	1198	986	19.07	1901	108	459	22%	-18%
4	20621	2469	1838	-359	379	463	22.33	924	82	743	40%	6%
5	19273	1819	1328	6270	800	579	13.52	1426	98	580	44%	-14%
6	16939	2458	1867	1827	635	453	14.14	1198	132	599	32%	-9%
7	29964	3130	2154	13130	1510	977	34.71	863	62	804	37%	-6%
8	20475	2955	2310	2758	1263	1121	25.00	819	92	625	27%	-12%
9	13949	1952	1506	1024	285	261	12.27	1137	123	515	34%	-18%
10	27795	2961	2050	22313	2269	1490	33.59	827	61	781	38%	-1%
11	14833	1776	1308	3941	270	258	13.76	1078	95	404	31%	-1%
12	11597	904	744	-32	23	65	10.70	1084	70	253	34%	-17%
13	15186	1409	1165	-2905	-196	-51	19.65	773	59	264	23%	-17%
14	10620	1206	927	-2421	169	186	13.15	808	70	268	29%	-3%
15	28898	2617	2058	10255	1124	923	22.09	1308	93	583	28%	-7%
16	63978	6259	4981	24987	2131	1966	45.08	1419	110	1206	24%	-9%
17	26122	2516	1974	5855	847	657	20.70	1262	95	577	29%	-24%
18	30282	3451	2637	7921	1193	1009	21.51	1408	123	809	31%	-10%
19	14247	1897	1369	2511	669	445	12.85	1109	107	532	39%	-2%
20	48925	4869	3907	26999	2866	2430	44.78	1092	87	1700	44%	-1%
21	29561	2880	2115	9694	1286	873	22.56	1311	94	685	32%	-16%
22	28216	2747	2148	13359	1763	1436	24.06	1173	89	747	35%	-4%
SUM	563,150	58,016	44,400	175,085	21,814	17,691	487.11	1,156	91	14,369	32%	31%
ALL VA	563,150	57,783	44,300	175,085	21,960	17,763	487.11	1,156	91	14,355	32%	-8%

† A boxed cell signifies a VISN whose Specialized Outpatient Treatment does not meet the standard of 1000 visits per filled FTEE, and/or does not meet the goal of 75 veterans treated per filled FTEE.

Table 3-2. Workload for Specialized Outpatient PTSD Programs, by Individual Program, FY 2001.†

VISN	FACILITY	PROGRAM	FY 2001			DIFF: FY 2001 - FY 1996			FY 2001			FY 2001		DIFF: FY 2001 - FY 1996
			# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	# FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED/# VETS TREATED (%)	# NEW VETS TREATED/# VETS TREATED (%)
1	Boston HCS: Boston	PCT	5065	684	506	1312	313	200	3.95	1282	128	293	58%	-5.8%
1	Boston HCS: Boston	WSDTT	3292	206	179	438	-81	26	3.44	957	52	76	42%	-22.2%
1	Boston HCS: Brockton	PCT	5267	575	467	1763	254	213	3.52	1496	133	129	28%	-30.3%
1	Boston HCS: Brockton	SUPT	1469	270	140	-2788	-422	-292	2.05	717	68	45	32%	-24.6%
1	Connecticut HCS: West Haven*	PCT	9875	676	568	9875	676	568	5.94	1663	96	137	24%	NA
1	Connecticut HCS: West Haven	SUPT	3889	281	251	885	-6	57	4.43	878	57	48	19%	-20.1%
1	Manchester, NH	PCT	3114	287	193	191	58	11	2.21	1411	87	39	20%	-34.7%
1	Providence, RI	PCT	10381	955	770	3442	369	294	4.98	2087	155	180	23%	-14.9%
1	Togus, ME**	PCT	0	0	0	-4110	-487	-364	0.00	NA	NA	0	NA	NA
1	White River Junction, VT	PCT	2533	441	317	-1386	-86	-76	3.09	821	103	106	33%	-1.9%
2	Canandaigua, NY	PCT	6094	664	472	2164	406	254	4.77	1277	99	149	32%	3.6%
2	Western NY HCS: Batavia	PCT	4438	400	291	1117	123	-14	3.23	1376	90	67	23%	-33.4%
3	Bronx, NY	PCT	10130	461	389	3314	186	178	6.15	1648	63	58	15%	-23.5%
3	New Jersey HCS: East Orange	PCT	3679	429	290	-7286	-223	177	2.15	1715	135	87	30%	-70.0%
3	New York Harbor HCS: Brooklyn	PCT	10074	977	749	8123	655	258	4.78	2110	157	162	22%	-14.0%
3	New York Harbor HCS: New York	PCT	12369	773	641	10904	630	398	6.00	2062	107	153	24%	-19.3%
4	Clarksburg, WV**	PCT	0	0	0	-4235	-538	-366	0.00	NA	NA	0	NA	NA
4	Coatesville, PA	PCT	4743	383	293	-328	-96	-78	6.40	741	46	80	27%	-15.6%
4	Philadelphia, PA	PCT	5741	948	727	824	165	242	8.30	692	88	431	59%	19.1%
4	Pittsburgh (PA) HCS: Highland Drive	PCT	6529	800	599	1933	268	142	4.65	1404	129	166	28%	-8.2%
4	Pittsburgh (PA) HCS: Highland Drive	SUPT	3608	371	237	1447	166	62	2.98	1213	80	68	29%	-5.6%
5	Maryland HCS: Baltimore	PCT	4137	497	365	208	88	88	2.06	2003	177	138	38%	-14.9%
5	Maryland HCS: Perry Point	PCT	4460	529	421	1920	296	233	4.13	1081	102	271	64%	-35.6%
5	Washington, DC	PCT	10676	839	560	4142	480	268	7.33	1457	76	178	32%	-15.5%
6	Asheville, NC	PCT	801	113	81	-467	-69	-28	1.20	668	68	20	25%	-68.0%
6	Durham, NC	PCT	3638	836	640	-139	227	148	4.41	825	145	207	32%	-20.9%
6	Fayetteville, NC*	PCT	438	107	78	438	107	78	0.47	936	167	77	99%	NA
6	Hampton, VA	PCT	7840	897	727	1610	298	220	5.10	1539	143	211	29%	-8.6%
6	Salisbury, NC	PCT	4222	527	347	385	119	45	2.97	1421	117	86	25%	-9.7%
7	Atlanta, GA	PCT	6485	459	322	2424	142	117	2.77	2342	116	98	30%	-33.0%
7	Augusta, GA*	PCT	0	0	0	NC	0	NC	11.43	NC	NC	0	NC	NC
7	Birmingham, AL	PCT	3469	692	471	465	237	141	4.00	867	118	102	22%	-27.4%
7	Central AL Veterans HCS: Tuskegee	PCT	4303	452	272	1477	180	54	4.68	920	58	125	46%	-7.3%
7	Charleston, SC	PCT	3802	470	351	691	126	68	3.25	1170	108	102	29%	-10.5%
7	Dublin, GA*	PCT	5780	440	317	5780	440	317	5.75	1006	55	198	62%	NA
7	Tuscaloosa, AL	PCT	6125	737	449	2293	254	91	2.84	2156	158	182	41%	-23.7%
8	Bay Pines, FL	SUPT	4339	1134	906	1103	783	688	8.41	516	108	193	21%	-39.2%
8	Miami, FL	PCT	4885	412	322	1652	187	173	3.98	1228	81	90	28%	-3.6%
8	No.FL/So.GA Veterans HCS: Gainesville	PCT	3301	417	333	775	198	159	4.61	717	72	135	41%	-15.2%
8	San Juan, PR	PCT	3542	502	397	-197	-33	20	4.00	886	99	96	24%	-4.7%
8	Tampa, FL	PCT	4408	514	361	-575	191	109	4.00	1102	90	114	32%	-19.6%

Table 3-2. Workload for Specialized Outpatient PTSD Programs, by Individual Program, FY 2001.†

VISN	FACILITY	PROGRAM	FY 2001			DIFF: FY 2001 - FY 1996			FY 2001			FY 2001		DIFF: FY 2001 - FY 1996
			# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	# FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED/# VETS TREATED (%)	
9	Lexington, KY	PCT	3647	242	217	2597	28	57	2.90	1258	75	101	47%	-53.5%
9	Louisville, KY	PCT	1059	298	219	-652	14	10	1.95	543	112	97	44%	-38.5%
9	Memphis, TN	PCT	3679	538	358	-476	151	56	2.80	1315	128	149	42%	-4.4%
9	Middle TN HCS: Murfreesboro**	PCT	0	0	0	-1741	-210	-172	0.00	NA	NA	0	NA	NA
9	Middle TN HCS: Nashville**	PCT	0	0	0	-597	-88	-78	0.00	NA	NA	0	NA	NA
9	Mountain Home, TN	PCT	5564	874	712	1893	294	285	4.62	1205	154	168	24%	-24.2%
10	Brecksville, OH*	PCT	12440	799	558	12440	799	558	12.09	1029	46	174	31%	NA
10	Brecksville, OH	WSDTT	1735	295	111	-24	90	-45	3.50	496	32	40	36%	-25.5%
10	Chillicothe, OH	PCT	3564	812	553	-159	321	126	3.74	952	148	150	27%	-10.8%
10	Cincinnati, OH*	PCT	5156	577	419	5156	577	419	8.64	597	48	160	38%	NA
10	Columbus, OH*	PCT	2561	378	294	2561	378	294	3.59	712	82	80	27%	NA
10	Dayton, OH*	PCT	2339	295	216	2339	295	216	2.02	1158	107	205	95%	NA
11	Ann Arbor (MI) HCS	PCT	2838	244	172	391	7	5	2.91	975	59	49	28%	-10.4%
11	Battle Creek, MI	PCT	6068	714	554	2805	162	224	4.75	1277	117	170	31%	-10.8%
11	Danville, IL	PCT	2882	511	328	352	193	62	2.80	1029	117	115	35%	-10.1%
11	Northern IN HCS: Marion	PCT	3045	373	294	393	15	6	3.30	923	89	77	26%	-1.2%
12	Chicago (IL) HCS: West Side	PCT	8847	537	444	1703	-110	169	6.20	1427	72	129	29%	-6.9%
12	Hines, IL	PCT	2652	343	285	-297	107	82	3.32	798	86	109	38%	-6.1%
12	Iron Mountain**	PCT	0	0	0	-1536	-291	-204	0.00	NA	NA	0	NA	NA
12	Madison, WI*	WSDTT	98	26	15	98	26	15	1.18	83	13	15	100%	NA
13	Black Hills(SD) HCS: Fort Meade	SUPT	4392	440	341	277	165	133	4.80	915	71	93	27%	-10.2%
13	Minneapolis, MN	PCT	9629	876	721	2201	249	241	14.05	686	51	157	22%	-18.2%
13	Sioux Falls, SD	PCT	1165	159	134	305	33	43	0.80	1456	168	18	13%	-26.1%
13	St. Cloud, MN**	PCT	0	0	0	-5688	-545	-421	0.00	NA	NA	0	NA	NA
14	Central IA HCS: Knoxville*	PCT	1783	127	102	1783	127	102	1.07	1668	95	35	34%	NA
14	Central IA HCS: Knoxville**	SUPT	0	0	0	-4387	-290	-254	0.00	NA	NA	0	NA	NA
14	Iowa City, IA	PCT	3422	564	425	-406	-78	-4	4.50	761	95	90	21%	-10.8%
14	NE-Western IA HCS: Lincoln	PCT	1583	214	134	-661	45	-6	3.00	528	45	48	36%	-7.0%
14	NE-Western IA HCS: Omaha	PCT	3832	307	271	1250	99	104	4.58	836	59	96	35%	-8.3%
15	Eastern KS HCS: Topeka	PCT	9068	994	750	1185	543	340	7.00	1295	107	158	21%	-18.9%
15	Kansas City, MO	PCT	4888	562	465	1751	251	236	3.29	1488	142	187	40%	-10.9%
15	Poplar Bluff, MO*	PCT	1001	263	206	1001	263	206	2.50	400	82	30	15%	NA
15	St. Louis, MO	PCT	8970	756	719	5686	422	436	5.08	1767	142	154	21%	-29.8%
15	Wichita, KS	PCT	4971	367	289	632	36	44	4.23	1174	68	109	38%	3.8%
16	Fayetteville, AR	PCT	4076	882	592	1662	384	211	4.45	916	133	122	21%	-16.7%
16	Gulf Coast (MS) Veterans HCS (Biloxi)	PCT	5642	582	474	1224	-19	48	3.96	1424	120	95	20%	-11.4%
16	Houston, TX	PCT	16564	1537	1291	7459	723	653	15.00	1104	86	329	25%	-14.2%
16	Jackson, MS	PCT	5855	907	785	2101	463	470	4.81	1217	163	160	20%	-24.4%
16	New Orleans, LA***	PCT	21195	1912	1458	10229	509	505	9.81	2161	149	382	26%	-3.7%
16	New Orleans, LA	WSDTT	680	100	69	-877	-166	-84	2.08	328	33	25	36%	-10.2%
16	Oklahoma City, OK	PCT	9966	565	479	3189	96	88	4.97	2005	96	110	23%	-25.6%

Table 3-2. Workload for Specialized Outpatient PTSD Programs, by Individual Program, FY 2001.†

VISN	FACILITY	PROGRAM	FY 2001			DIFF: FY 2001 - FY 1996			FY 2001			FY 2001		DIFF: FY 2001 - FY 1996
			# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	# FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED/# VETS TREATED (%)	# NEW VETS TREATED/# VETS TREATED (%)
17	Central TX Veterans HCS: Temple	PCT	5184	668	304	2383	510	172	5.46	949	56	139	46%	-51.2%
17	Central TX Veterans HCS: Waco	PCT	5297	299	263	108	-53	-50	3.88	1367	68	68	26%	-74.1%
17	North TX HCS: Dallas	PCT	8268	864	637	2087	362	270	5.68	1455	112	236	37%	-10.6%
17	South TX Veterans HCS: San Antonio	PCT	7373	964	777	1277	344	262	5.68	1297	137	136	18%	-15.7%
18	El Paso (TX) Veterans HCS	PCT	7068	864	572	60	110	59	4.55	1552	126	181	32%	-15.1%
18	New Mexico HCS (Albuquerque)	PCT	11286	1363	1087	4472	845	678	8.19	1379	133	387	36%	-20.1%
18	Phoenix, AZ	PCT	6902	591	487	2310	165	157	4.74	1455	103	104	21%	-30.5%
18	Southern AZ HCS (Tucson)	PCT	5026	652	501	1079	162	135	4.03	1249	124	138	28%	-15.9%
19	Cheyenne, WY	PCT	1152	230	156	-1409	-108	-121	2.00	576	78	90	58%	23.4%
19	Denver, CO**	PCT	0	0	0	-3389	-336	-243	0.00	NA	NA	0	NA	NA
19	Grand Junction, CO	PCT	2819	502	349	1670	356	254	2.50	1128	140	128	37%	-63.3%
19	Salt Lake City (UT) HCS	PCT	10276	1171	866	5639	778	560	8.35	1231	104	315	36%	-9.4%
20	Boise, ID	PCT	4509	537	393	-194	8	9	7.00	644	56	146	37%	-5.6%
20	Portland, OR	PCT	8421	1156	840	4951	878	542	9.00	936	93	409	49%	2.0%
20	Puget Sound (WA) HCS	PCT	32628	2973	2492	18875	1536	1405	25.78	1265	97	931	37%	-18.1%
20	Spokane, WA*	PCT	3367	373	274	3367	373	274	3.00	1122	91	258	94%	NA
21	Honolulu, HI	PCT	5061	463	318	1229	81	39	3.87	1306	82	85	27%	-18.1%
21	Northern CA HCS: Sacramento	PCT	1157	278	148	-1364	-135	-167	2.78	417	53	77	52%	-40.0%
21	Palo Alto (CA) HCS: San Jose	PCT	7588	821	581	4196	532	345	3.91	1941	149	246	42%	-19.5%
21	San Francisco, CA	PCT	12844	1440	1088	6552	690	477	8.50	1511	128	291	27%	-31.4%
21	San Francisco, CA	SUPT	2911	127	94	-919	-57	-42	3.49	833	27	23	24%	-22.6%
22	Greater Los Angeles (CA) HCS East LA	PCT	6258	596	484	1031	85	113	3.90	1605	124	117	24%	-11.4%
22	Greater Los Angeles (CA) HCS West LA*	PCT	5486	653	508	5486	653	508	9.93	553	51	196	39%	NA
22	Loma Linda, CA	PCT	3012	217	173	1	-36	-20	2.00	1506	87	69	40%	-0.5%
22	Loma Linda, CA	WSDTT	2115	296	199	49	147	86	2.58	821	77	61	31%	-12.7%
22	San Diego (CA) HCS CA	PCT	11345	1049	831	6792	504	402	5.66	2006	147	309	37%	-16.2%
SUM			563,150	60,272	45,675	175,085	21,043	16,159	487.11	1,156	94	14,623	32%	-15.3%
ALL VA			563,150	57,783	44,300	175,085	21,960	17,763	487.11	1,156	91	14,355	32%	-21.0%

† A boxed cell signifies a program whose Specialized Outpatient Treatment does not meet the standard of 1000 visits per filled FTEE, and/or does not meet the goal of 75 veterans per treated filled FTEE.

* Program was not open in FY 1996.

** Program was closed for all of FY 2000.

*** Due to administrative restructuring, data for the PCT and the SUPT are combined.

NA = not Applicable. NR = Not Reported. NC = Not Calculated because data were not reported.

Table 3-3. Workload for Specialized Intensive PTSD Programs, by VA Facility, FY 2001.

VISN	FY 2001			DIFFERENCE: FY 2001 - FY 1997		
	# Of ADMISSIONS	#Of DAYS OF TREATMENT	LENGTH OF PROGRAM	# Of ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM
1	382	15657	41	-38	802	6
2	254	4001	16	14	53	-1
3	330	13320	40	-193	-5641	4
4	264	14342	54	-112	-1283	13
5	216	15487	72	-10	5600	28
6	244	9686	40	7	661	2
7	356	6745	19	-455	-12822	-5
8	149	7852	53	12	1	-5
10	182	6520	36	-35	-4769	-16
11	451	8831	20	157	232	-10
12	376	16824	45	-27	366	4
13	62	552	9	14	99	-1
14	51	1779	35	-82	-7293	-33
15	112	8567	76	1	-2383	-22
16	452	12577	28	80	-14	-6
17	95	5790	61	-34	-1325	6
19	157	4115	26	-28	-4665	-21
20	619	13807	22	-83	-6657	-7
21	260	15674	60	-108	-3356	9
22	0	0	NA	-82	-4703	NA
ALL VA	5012	182126	36	-1002	-47097	-2

Note: No Specialized Intensive Program was open in VISN 9 or VISN 18 for these fiscal years.

NA=Not Applicable.

Table 3-4. Workload for Specialized Intensive PTSD Programs, by VA Facility, FY 2001. †

VISN	FACILITY	FY 2001			DIFFERENCE: FY 2001 - FY 1997		
		# Of ADMISSIONS	#Of DAYS OF TREATMENT	LENGTH OF PROGRAM †	# Of ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM †
1	Connecticut HCS: West Haven	43	3639	85	-3	205	10
1	Northampton, MA	108	4396	41	-1	-2604	-24
1	Togus, ME*	140	7515	15	-51	3702	-1
1	White River Junction, VT*	91	107	17	17	-501	-3
2	Western NY HCS: Batavia	254	4001	16	14	53	-1
3	Bronx, NY**	0	0	NA	-146	-2972	NA
3	Hudson Valley (NY) HCS: Montrose	158	6350	40	-22	-317	3
3	New Jersey HCS: Lyons	172	6970	41	-25	-2352	-7
4	Clarksburg, WV	69	3244	47	-75	1462	35
4	Coatesville, PA	195	11098	57	-37	-2745	-3
5	Martinsburg, WV	140	14119	101	17	5265	29
5	Maryland HCS: Baltimore	76	1368	18	-27	335	8
6	Salem, VA	124	4152	33	7	64	-1
6	Salisbury, NC	120	5534	46	0	597	5
7	Augusta, GA**	0	0	NA	-431	-8505	NA
7	Central AL Veterans HCS: Tuskegee**	0	0	NA	-210	-5534	5
7	Tuscaloosa, AL*	356	6745	34	186	1217	-5
8	Bay Pines, FL	80	3718	46	4	182	0
8	Miami, FL	69	4134	60	8	-181	-11
10	Brecksville, OH	42	198	82	-6	-3162	12
10	Cincinnati, OH	80	1710	44	-26	-1926	10
10	Dayton, OH	60	4612	77	-3	319	9
11	Battle Creek, MI	451	8831	20	157	232	-10
12	Milwaukee, WI	32	4611	144	14	-513	-141
12	North Chicago, IL	276	8565	31	1	542	2
12	Tomah, WI	68	3648	54	-42	337	24
13	Minneapolis, MN*	62	552	102	14	99	15
14	Central IA HCS: Des Moines	51	1779	35	-15	-601	-1
14	Central IA HCS: Knoxville**	0	0	NA	-67	-6692	NA
15	Eastern KS HCS: Topeka	112	8567	76	1	-2383	-22

Table 3-4. Workload for Specialized Intensive PTSD Programs, by VA Facility, FY 2001. †

VISN	FACILITY	FY 2001			DIFFERENCE: FY 2001 - FY 1997		
		# Of ADMISSIONS	#Of DAYS OF TREATMENT	LENGTH OF PROGRAM †	# Of ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM †
16	Central AR Veterans HCS (Little Rock)	243	7486	31	95	-277	-22
16	Jackson, MS	140	2609	24	15	284	6
16	New Orleans, LA	69	2482	36	-30	-21	11
17	Central TX Veterans HCS: Waco	95	5790	59	-34	-1325	4
19	Denver, CO	157	4115	32	46	-1496	-19
19	Sheridan, WY**	0	0	NA	-74	-3169	NA
20	Alaska HCS (Anchorage)**	0	0	NA	-38	-3650	NA
20	Boise, ID	20	795	40	-4	-93	3
20	Puget Sound (WA) HCS: American Lake	172	6141	36	-60	-2438	-1
20	Puget Sound (WA) HCS: Seattle	312	3876	12	25	-155	-2
20	Roseburg (OR) HCS	115	2995	26	-6	-321	-1
21	Hilo, HI	56	3399	61	-34	-526	17
21	Palo Alto (CA) HCS: Menlo Park	204	12275	61	-74	-2830	6
22	Greater Los Angeles (CA) HCS**	0	0	NA	-82	-4703	NA
ALL VA		5012	182126	36	-1002	-47097	-2

Note: No Specialized Intensive Program was open in VISN 9 or VISN 18 for these fiscal years.

NA=Not Applicable.

† "Length of Program" for the PTSD Day Hospitals was calculated from admission & discharge dates rather than as a ratio of Days of Treatment to Number Admissions.

* For this facility FY 1998 data were used as baseline for computing differences because FY 1997 data were missing for one or more components.

** The Specialized Intensive PTSD program(s) at the facility was closed for all of FY 2001.

Table 3.5. FTEE for Specialized Outpatient PTSD Programs, by VISN, FY 2001

VISN	FILLED FTEE FY 2001	DIFFERENCE: FILLED FTEE FY 2001 - FY 1996
1	33.60	-2.96
2	8.00	-0.20
3	19.07	-1.60
4	22.33	-3.06
5	13.52	1.12
6	14.14	-0.89
7	34.71	14.92
8	25.00	3.45
9	12.27	-11.01
10	33.59	26.04
11	13.76	-2.71
12	10.70	-1.35
13	19.65	1.10
14	13.15	-2.52
15	22.09	6.39
16	45.08	9.77
17	20.70	0.96
18	21.51	0.42
19	12.85	-0.27
20	44.78	22.12
21	22.56	-1.67
22	24.06	7.64
ALL VA	487.11	65.69

Table 3.6. FTEE for Specialized Outpatient PTSD Programs, by Individual Program, FY 2001.

VISN	FACILITY	PROGRAM	FILLED FTEE FY 2001	DIFFERENCE: FILLED FTEE FY 2001 - FY 1996
1	Boston HCS: Boston	PCT	3.95	0.03
1	Boston HCS: Boston	WSDTT	3.44	-2.21
1	Boston HCS: Brockton	PCT	3.52	-0.06
1	Boston HCS: Brockton	SUPT	2.05	-2.10
1	Connecticut HCS: West Haven*	PCT	5.94	5.94
1	Connecticut HCS: West Haven	SUPT	4.43	0.43
1	Manchester, NH	PCT	2.21	-0.29
1	Providence, RI	PCT	4.98	-0.78
1	Togus, ME**	PCT	0.00	-3.10
1	White River Junction, VT	PCT	3.09	-0.82
2	Canandaigua, NY	PCT	4.77	0.57
2	Western NY HCS: Batavia	PCT	3.23	-0.77
3	Bronx, NY	PCT	6.15	2.55
3	New Jersey HCS: East Orange	PCT	2.15	-1.69
3	New York Harbor HCS: Brooklyn	PCT	4.78	-2.46
3	New York Harbor HCS: New York	PCT	6.00	0.00
4	Clarksburg, WV**	PCT	0.00	-3.72
4	Coatesville, PA	PCT	6.40	1.39
4	Philadelphia, PA	PCT	8.30	3.15
4	Pittsburgh (PA) HCS: Highland Drive	PCT	4.65	-1.85
4	Pittsburgh (PA) HCS: Highland Drive	SUPT	2.98	-2.03
5	Maryland HCS: Baltimore	PCT	2.06	-0.80
5	Maryland HCS: Perry Point	PCT	4.13	1.53
5	Washington, DC	PCT	7.33	0.39
6	Asheville, NC	PCT	1.20	-0.90
6	Durham, NC	PCT	4.41	0.12
6	Fayetteville, NC*	PCT	0.47	0.47
6	Hampton, VA	PCT	5.10	0.82
6	Salisbury, NC	PCT	2.97	-1.39
7	Atlanta, GA	PCT	2.77	-1.13
7	Augusta, GA*	PCT	11.43	11.43
7	Birmingham, AL	PCT	4.00	0.10
7	Central AL Veterans HCS: Tuskegee	PCT	4.68	0.81
7	Charleston, SC	PCT	3.25	-0.87
7	Dublin, GA*	PCT	5.75	5.75
7	Tuscaloosa, AL	PCT	2.84	-1.16
8	Bay Pines, FL	SUPT	8.41	3.41
8	Miami, FL	PCT	3.98	-0.02
8	No.FL/So.GA Veterans HCS: Gainesville	PCT	4.61	-0.10
8	San Juan, PR	PCT	4.00	0.00
8	Tampa, FL	PCT	4.00	0.16
9	Lexington, KY	PCT	2.90	-0.91
9	Louisville, KY	PCT	1.95	-3.05
9	Memphis, TN	PCT	2.80	-1.20
9	Middle TN HCS: Murfreesboro**	PCT	0.00	-4.00
9	Middle TN HCS: Nashville**	PCT	0.00	-2.47
9	Mountain Home, TN	PCT	4.62	0.62
10	Brecksville, OH*	PCT	12.09	12.09
10	Brecksville, OH	WSDTT	3.50	-0.25
10	Chillicothe, OH	PCT	3.74	-0.06
10	Cincinnati, OH*	PCT	8.64	8.64
10	Columbus, OH*	PCT	3.59	3.59
10	Dayton, OH*	PCT	2.02	2.02
11	Ann Arbor (MI) HCS	PCT	2.91	-1.79
11	Battle Creek, MI	PCT	4.75	0.50
11	Danville, IL	PCT	2.80	-0.72
11	Northern IN HCS: Marion	PCT	3.30	-0.70

Table 3.6. FTEE for Specialized Outpatient PTSD Programs, by Individual Program, FY 2001.

VISN	FACILITY	PROGRAM	FILLED FTEE FY 2001	DIFFERENCE: FILLED FTEE FY 2001 - FY 1996
12	Chicago (IL) HCS: West Side	PCT	6.20	0.50
12	Hines, IL	PCT	3.32	-0.88
12	Iron Mountain**	PCT	0.00	-2.15
12	Madison, WI*	WSDTT	1.18	1.18
13	Black Hills(SD) HCS: Fort Meade	SUPT	4.80	-0.20
13	Minneapolis, MN	PCT	14.05	8.15
13	Sioux Falls, SD	PCT	0.80	-2.56
13	St. Cloud, MN**	PCT	0.00	-4.29
14	Central IA HCS: Knoxville*	PCT	1.07	1.07
14	Central IA HCS: Knoxville**	SUPT	0.00	-4.50
14	Iowa City, IA	PCT	4.50	0.25
14	NE-Western IA HCS: Lincoln	PCT	3.00	0.08
14	NE-Western IA HCS: Omaha	PCT	4.58	0.58
15	Eastern KS HCS: Topeka	PCT	7.00	1.79
15	Kansas City, MO	PCT	3.29	-0.70
15	Poplar Bluff, MO*	PCT	2.50	2.50
15	St. Louis, MO	PCT	5.08	1.08
15	Wichita, KS	PCT	4.23	1.73
16	Fayetteville, AR	PCT	4.45	0.65
16	Gulf Coast (MS) Veterans HCS (Biloxi)	PCT	3.96	-0.04
16	Houston, TX	PCT	15.00	9.09
16	Jackson, MS	PCT	4.81	0.51
16	New Orleans, LA***	PCT	9.81	1.31
16	New Orleans, LA	WSDTT	2.08	-2.23
16	Oklahoma City, OK	PCT	4.97	0.47
17	Central TX Veterans HCS: Temple	PCT	5.46	2.30
17	Central TX Veterans HCS: Waco	PCT	3.88	-0.61
17	North TX HCS: Dallas	PCT	5.68	-0.62
17	South TX Veterans HCS: San Antonio	PCT	5.68	-0.12
18	El Paso (TX) Veterans HCS	PCT	4.55	0.55
18	New Mexico HCS (Albuquerque)	PCT	8.19	1.34
18	Phoenix, AZ	PCT	4.74	-1.63
18	Southern AZ HCS (Tucson)	PCT	4.03	0.16
19	Cheyenne, WY	PCT	2.00	-1.52
19	Denver, CO**	PCT	0.00	-3.75
19	Grand Junction, CO	PCT	2.50	0.78
19	Salt Lake City (UT) HCS	PCT	8.35	4.22
20	Boise, ID	PCT	7.00	1.00
20	Portland, OR	PCT	9.00	4.83
20	Puget Sound (WA) HCS	PCT	25.78	13.29
20	Spokane, WA*	PCT	3.00	3.00
21	Honolulu, HI	PCT	3.87	-1.25
21	Northern CA HCS: Sacramento	PCT	2.78	-0.55
21	Palo Alto (CA) HCS: San Jose	PCT	3.91	0.51
21	San Francisco, CA	PCT	8.50	1.12
21	San Francisco, CA	SUPT	3.49	-1.51
22	Greater Los Angeles (CA) HCS: East LA	PCT	3.90	-1.10
22	Greater Los Angeles (CA) HCS: West LA*	PCT	9.93	9.93
22	Loma Linda, CA	PCT	2.00	-2.00
22	Loma Linda, CA	WSDTT	2.58	-1.02
22	San Diego (CA) HCS CA	PCT	5.66	1.83
ALL VA			487.11	65.69

* Program was not open in FY 1996.

** The Specialized Outpatient PTSD program at the facility was closed for all of FY 2001.

*** Due to administrative restructuring, data for the PCT and the SUPT are combined.

Table 3-7. FTEE for Specialized Intensive PTSD Programs, by VISN, FY 2001.

VISN	FILLED FTEE FY 2001	DIFFERENCE: FILLED FTEE FY 2001 - FY 1997
1	17.01	-2.71
2	10.63	-17.31
3	28.39	-17.12
4	26.66	-5.34
5	7.80	-2.92
6	31.09	-3.84
7	8.61	-59.01
8	13.14	-13.47
10	19.32	-6.72
11	14.94	-8.44
12	25.91	-3.99
13	1.19	-3.20
14	2.87	-10.34
15	19.14	2.36
16	16.35	-34.36
17	17.45	1.00
19	7.53	-30.38
20	30.71	-13.83
21	42.51	-17.63
22	0.00	-7.89
ALL VA	341.26	-255.15

Note: No Specialized Intensive Program was open in VISN 9 or VISN 18 for these fiscal years.

Table 3-8. FTEE for Specialized Intensive PTSD Programs, by VA Facility, FY 2001.

VISN	FACILITY	FILLED FTEE FY 2001	DIFFERENCE: FILLED FTEE FY 2001 - FY 1997
1	Connecticut HCS: West Haven	4.82	-0.05
1	Northampton, MA	7.26	2.74
1	Togus, ME*	2.82	-3.36
1	White River Junction, VT*	2.11	-2.04
2	Western NY HCS: Batavia	10.63	-17.31
3	Bronx**	0.00	-11.90
3	Hudson Valley (NY) HCS: Montrose	15.09	0.06
3	New Jersey HCS: Lyons	13.30	-5.28
4	Clarksburg, WV	7.76	-0.54
4	Coatesville, PA	18.90	-4.80
5	Martinsburg, WV	5.84	-1.03
5	Maryland HCS: Baltimore	1.96	-1.89
6	Salem, VA	16.00	-0.50
6	Salisbury, NC	15.09	-3.34
7	Augusta, GA**	0.00	-36.29
7	Central AL Veterans HCS: Tuskegee**	0.00	-20.94
7	Tuscaloosa, AL*	8.61	-1.78
8	Bay Pines, FL	6.56	-3.31
8	Miami, FL	6.58	-10.17
10	Brecksville, OH	4.66	1.86
10	Cincinnati, OH	6.36	-8.14
10	Dayton, OH	8.30	-0.44
11	Battle Creek, MI	14.94	-8.44
12	Milwaukee, WI	3.23	-0.87
12	North Chicago, IL	16.43	0.40
12	Tomah, WI	6.26	-3.52
13	Minneapolis, MN*	1.19	-3.20
14	Central IA HCS: Des Moines	2.87	-1.53
14	Central IA HCS: Knoxville**	0.00	-8.81
15	Eastern KS HCS: Topeka	19.14	2.36
16	Central AR Veterans HCS (Little Rock)	12.38	-19.02
16	Jackson, MS	3.98	-1.99
16	New Orleans, LA	0.00	-13.35
17	Central TX Veterans HCS: Waco	17.45	1.00
19	Denver, CO	7.53	-24.40
19	Sheridan, WY**	0.00	-5.98
20	Alaska HCS (Anchorage)**	0.00	-3.38
20	Boise, ID	4.00	-0.15
20	Puget Sound (WA) HCS: American Lake	9.34	1.18
20	Puget Sound (WA) HCS: Seattle	12.62	-2.73
20	Roseburg (OR) HCS	4.75	-8.75
21	Hilo, HI	14.81	-0.25
21	Palo Alto (CA) HCS	27.70	-17.38
22	Greater Los Angeles (CA) HCS**	0.00	-7.89
ALL VA		341.26	-255.15

Note: No Specialized Intensive Program was open in VISN 9 or VISN 18 for these fiscal years.

* For this facility FY 1998 data were used as baseline for computing differences because FY 1997 data were missing for one or more components.

** The Specialized Intensive PTSD program at this facility was closed for all of FY 2001.

Table 3-9. Costs for Outpatient Specialized PTSD Programs, by VISN, FY 2001.†

VISN	FY 2001					DIFF: FY 2001 -FY 1996		
	# VISITS	# VETERANS TREATED	DIRECT COST†	COST PER VISIT	COST PER CAPITA	DIRECT COST†	COST PER VISIT	COST PER CAPITA
1	44885	3232	\$3,020,448	\$67	\$935	\$279,624	-\$10	-\$217
2	10532	731	\$688,510	\$65	\$942	\$125,308	-\$12	-\$405
3	36252	2051	\$1,891,152	\$52	\$922	\$256,221	-\$25	-\$613
4	20621	1838	\$2,200,090	\$107	\$1,197	\$329,324	\$18	-\$164
5	19273	1328	\$1,193,652	\$62	\$899	\$474,889	\$7	-\$61
6	16939	1867	\$1,241,558	\$73	\$665	\$203,690	\$5	-\$69
7	29964	2154	\$2,990,220	\$100	\$1,388	\$1,533,248	\$13	\$150
8	20475	2310	\$2,212,173	\$108	\$958	\$662,802	\$21	-\$345
9	13949	1506	\$1,053,806	\$76	\$700	-\$635,738	-\$55	-\$657
10	27795	2050	\$2,864,186	\$103	\$1,397	\$2,341,181	\$8	\$463
11	14833	1308	\$1,059,720	\$71	\$810	-\$26,131	-\$28	-\$224
12	11597	744	\$1,010,250	\$87	\$1,358	\$128,140	\$11	\$59
13	15186	1165	\$1,572,666	\$104	\$1,350	\$234,370	\$30	\$249
14	10620	927	\$1,191,930	\$112	\$1,286	-\$138,921	\$10	-\$510
15	28898	2058	\$1,921,581	\$66	\$934	\$688,509	\$0	-\$153
16	63978	4981	\$4,204,950	\$66	\$844	\$1,512,355	-\$3	-\$49
17	26122	1974	\$1,728,396	\$66	\$876	\$223,645	-\$8	-\$267
18	30282	2637	\$1,866,624	\$62	\$708	\$323,568	-\$7	-\$240
19	14247	1369	\$1,161,544	\$82	\$848	\$134,694	-\$6	-\$263
20	48925	3907	\$3,665,039	\$75	\$938	\$2,028,283	\$0	-\$170
21	29561	2115	\$2,026,783	\$69	\$958	-\$66	-\$33	-\$674
22	28216	2148	\$2,159,094	\$77	\$1,005	\$834,987	-\$13	-\$855
ALL VA	563,150	44,300	\$42,924,372	\$76	\$969	\$11,513,982	-\$5	-\$215

† Direct Costs are All Other Dollars plus total Personal Dollars.

Table 3-10. Cost for Specialized Outpatient PTSD Programs, by Individual Program, FY 2001.†

VISN		PROGRAM	FY 2001					DIFF: FY 2001 - FY 1996		
			# VISITS	# VETS TREATED	DIRECT COST†	COST PER VISIT	COST PER CAPITA	DIRECT COST†	COST PER VISIT	COST PER CAPITA
1	Boston (MA) HCS: Boston	PCT	5065	506	\$355,121	\$70	\$702	-\$67,097	-\$42	-\$678
1	Boston (MA) HCS: Boston	WSDTT	3292	179	\$311,107	\$95	\$1,738	\$27,870	-\$5	-\$113
1	Boston HCS: Brockton	PCT	5267	467	\$283,687	\$54	\$607	\$39,716	-\$16	-\$353
1	Boston HCS: Brockton	SUPT	1469	140	\$165,164	\$112	\$1,180	-\$164,350	\$35	\$417
1	Connecticut HCS: West Haven*	PCT	9875	568	\$555,139	\$56	\$977	\$555,139	NA	NA
1	Connecticut HCS: West Haven	SUPT	3889	251	\$434,749	\$112	\$1,732	\$84,336	-\$5	-\$74
1	Manchester, NH	PCT	3114	193	\$169,842	\$55	\$880	-\$5,443	-\$5	-\$83
1	Providence, RI	PCT	10381	770	\$471,346	\$45	\$612	\$50,387	-\$15	-\$272
1	Togus**	PCT	0	0	\$0	NA	NA	-\$212,964	NA	NA
1	White River Junction, VT	PCT	2533	317	\$274,294	\$108	\$865	-\$27,969	\$31	\$96
2	Canandaigua, NY	PCT	6094	472	\$421,273	\$69	\$893	\$156,440	\$2	-\$322
2	Western NY HCS: Batavia	PCT	4438	291	\$267,236	\$60	\$918	-\$31,133	-\$30	-\$60
3	Bronx, NY	PCT	10130	389	\$666,536	\$66	\$1,713	\$361,244	\$21	\$267
3	New Jersey HCS: East Orange	PCT	3679	290	\$197,029	\$54	\$679	-\$126,718	\$24	-\$2,186
3	New York Harbor HCS: Brooklyn	PCT	10074	749	\$427,636	\$42	\$571	-\$88,040	-\$222	-\$479
3	New York Harbor HCS: New York	PCT	12369	641	\$599,951	\$49	\$936	\$109,735	-\$286	-\$1,081
4	Clarksburg**	PCT	0	0	\$0	NA	NA	-\$250,539	NA	NA
4	Coatesville, PA	PCT	4743	293	\$616,785	\$130	\$2,105	\$217,670	\$51	\$1,029
4	Philadelphia, PA	PCT	5741	727	\$885,363	\$154	\$1,218	\$483,313	\$72	\$389
4	Pittsburgh (PA) HCS: Highland Drive	PCT	6529	599	\$450,671	\$69	\$752	-\$2,509	-\$30	-\$239
4	Pittsburgh (PA) HCS: Highland Drive	SUPT	3608	237	\$247,270	\$69	\$1,043	-\$118,612	-\$101	-\$1,047
5	Maryland HCS: Baltimore	PCT	4137	365	\$264,718	\$64	\$725	\$47,509	\$9	-\$59
5	Maryland HCS: Perry Point	PCT	4460	421	\$394,698	\$88	\$938	\$217,657	\$19	-\$4
5	Washington, DC	PCT	10676	560	\$534,236	\$50	\$954	\$209,723	\$0	-\$157
6	Asheville, NC	PCT	801	81	\$125,888	\$157	\$1,554	-\$4,889	\$54	\$354
6	Durham, NC	PCT	3638	640	\$371,972	\$102	\$581	\$88,029	\$27	\$4
6	Fayetteville, NC*	PCT	438	78	\$28,198	\$64	\$362	\$28,198	NA	NA
6	Hampton, VA	PCT	7840	727	\$375,927	\$48	\$517	\$118,528	\$7	\$9
6	Salisbury, NC	PCT	4222	347	\$339,572	\$80	\$979	-\$26,177	-\$15	-\$232
7	Atlanta, GA	PCT	6485	322	\$279,791	\$43	\$869	-\$10,084	-\$28	-\$545
7	Augusta, GA*	PCT	0	0	\$975,270	NC	NC	\$975,270	NC	NC
7	Birmingham, AL	PCT	3469	471	\$386,595	\$111	\$821	\$95,877	\$15	-\$60
7	Central AL Veterans HCS: Tuskegee	PCT	4303	272	\$312,044	\$73	\$1,147	\$97,890	-\$3	\$165
7	Charleston, SC	PCT	3802	351	\$380,316	\$100	\$1,084	\$44,643	-\$8	-\$103
7	Dublin, GA*	PCT	5780	317	\$387,502	\$67	\$1,222	\$387,502	NA	NA
7	Tuscaloosa, AL	PCT	6125	449	\$268,701	\$44	\$598	-\$57,851	-\$41	-\$314

Table 3-10. Cost for Specialized Outpatient PTSD Programs, by Individual Program, FY 2001.†

VISN		PROGRAM	FY 2001					DIFF: FY 2001 - FY 1996		
			# VISITS	# VETS TREATED	DIRECT COST†	COST PER VISIT	COST PER CAPITA	DIRECT COST†	COST PER VISIT	COST PER CAPITA
8	Bay Pines, FL	SUPT	4339	906	\$713,881	\$165	\$788	\$356,188	\$54	-\$853
8	Miami, FL	PCT	4885	322	\$377,475	\$77	\$1,172	\$46,260	-\$25	-\$1,051
8	No.FL/So.GA Veterans HCS: Gainesville	PCT	3301	333	\$409,575	\$124	\$1,230	\$102,765	\$3	-\$533
8	San Juan, PR	PCT	3542	397	\$369,326	\$104	\$930	\$84,419	\$28	\$175
8	Tampa, FL	PCT	4408	361	\$341,916	\$78	\$947	\$73,170	\$24	-\$119
9	Lexington, KY	PCT	3647	217	\$237,122	\$65	\$1,093	-\$32,435	-\$192	-\$592
9	Louisville, KY	PCT	1059	219	\$143,208	\$135	\$654	-\$150,182	-\$36	-\$750
9	Memphis, TN	PCT	3679	358	\$206,857	\$56	\$578	-\$107,057	-\$19	-\$462
9	Middle TN HCS: Murfreesboro**	PCT	0	0	\$0	NA	NA	-\$279,384	NA	NA
9	Middle TN HCS: Nashville**	PCT	0	0	\$0	NA	NA	-\$212,864	NA	NA
9	Mountain Home, TN	PCT	5564	712	\$466,619	\$84	\$655	\$146,184	-\$3	-\$95
10	Brecksville, OH*	PCT	12440	558	\$982,686	\$79	\$1,761	\$982,686	NA	NA
10	Brecksville, OH	WSDTT	1735	111	\$292,246	\$168	\$2,633	\$70,257	\$42	\$1,210
10	Chillicothe, OH	PCT	3564	553	\$338,337	\$95	\$612	\$37,321	\$14	-\$93
10	Cincinnati, OH*	PCT	5156	419	\$713,767	\$138	\$1,704	\$713,767	NA	NA
10	Columbus, OH*	PCT	2561	294	\$374,650	\$146	\$1,274	\$374,650	NA	NA
10	Dayton, OH*	PCT	2339	216	\$162,501	\$69	\$752	\$162,501	NA	NA
11	Ann Arbor (MI) HCS	PCT	2838	172	\$225,457	\$79	\$1,311	-\$85,650	-\$48	-\$552
11	Battle Creek, MI	PCT	6068	554	\$387,975	\$64	\$700	\$60,614	-\$36	-\$292
11	Danville, IL	PCT	2882	328	\$185,503	\$64	\$566	\$558	-\$9	-\$130
11	Northern IN HCS: Marion	PCT	3045	294	\$260,785	\$86	\$887	-\$1,653	-\$13	-\$24
12	Chicago (IL) HCS: West Side	PCT	8847	444	\$606,571	\$69	\$1,366	\$187,990	\$10	-\$156
12	Hines, IL	PCT	2652	285	\$318,474	\$120	\$1,117	-\$13,722	\$7	-\$519
12	Iron Mountain**	PCT	0	0	\$0	NA	NA	-\$131,333	NA	NA
12	Madison, WI*	WSDTT	98	15	\$85,205	\$869	\$5,680	\$85,205	NA	NA
13	Black Hills (SD) HCS: Fort Meade	SUPT	4392	341	\$383,348	\$87	\$1,124	\$55,086	\$8	-\$454
13	Minneapolis, MN	PCT	9629	721	\$1,097,379	\$114	\$1,522	\$579,776	\$44	\$444
13	Sioux Falls, SD	PCT	1165	134	\$91,939	\$79	\$686	-\$94,925	-\$138	-\$1,367
13	St. Cloud**	PCT	0	0	\$0	NA	NA	-\$305,567	NA	NA
14	Central IA HCS: Knoxville*	PCT	1783	102	\$67,897	\$38	\$666	\$67,897	NA	NA
14	Central IA HCS: Knoxville**	SUPT	0	0	\$0	NA	NA	-\$411,045	NA	NA
14	Iowa City, IA	PCT	3422	425	\$438,692	\$128	\$1,032	\$102,753	\$40	\$249
14	NE-Western IA HCS: Lincoln	PCT	1583	134	\$294,581	\$186	\$2,198	-\$11,069	\$50	\$15
14	NE-Western IA HCS: Omaha	PCT	3832	271	\$390,760	\$102	\$1,442	\$112,543	-\$6	-\$224
15	Eastern KS HCS: Topeka	PCT	9068	750	\$608,433	\$67	\$811	\$190,605	\$14	-\$208
15	Kansas City, MO	PCT	4888	465	\$340,335	\$70	\$732	\$13,316	-\$35	-\$696
15	Poplar Bluff, MO*	PCT	1001	206	\$200,118	\$200	\$971	\$200,118	NA	NA
15	St. Louis, MO	PCT	8970	719	\$477,829	\$53	\$665	\$172,813	-\$40	-\$413
15	Wichita, KS	PCT	4971	289	\$294,866	\$59	\$1,020	\$111,657	\$17	\$273

Table 3-10. Cost for Specialized Outpatient PTSD Programs, by Individual Program, FY 2001.†

VISN		PROGRAM	FY 2001					DIFF: FY 2001 - FY 1996		
			# VISITS	# VETS TREATED	DIRECT COST†	COST PER VISIT	COST PER CAPITA	DIRECT COST†	COST PER VISIT	COST PER CAPITA
16	Fayetteville, AR	PCT	4076	592	\$454,030	\$111	\$767	\$148,354	-\$15	-\$35
16	Gulf Coast (MS) Veterans HCS (Biloxi)	PCT	5642	474	\$383,759	\$68	\$810	\$111,759	\$6	\$171
16	Houston, TX	PCT	16564	1291	\$1,483,175	\$90	\$1,149	\$1,017,899	\$38	\$420
16	Jackson, MS	PCT	5855	785	\$406,954	\$70	\$518	\$49,586	-\$26	-\$616
16	New Orleans, LA***	PCT	21195	1458	\$851,693	\$40	\$584	\$531,576	\$11	\$98
16	New Orleans, LA	WSDTT	680	69	\$188,099	\$277	\$2,726	-\$168,384	\$48	\$396
16	Oklahoma City, OK	PCT	9966	479	\$437,240	\$44	\$913	\$100,057	-\$6	\$50
17	Central TX Veterans HCS: Temple	PCT	5184	304	\$372,987	\$72	\$1,227	\$19,966	-\$54	-\$1,447
17	Central TX Veterans HCS: Waco	PCT	5297	263	\$231,480	\$44	\$880	-\$33,745	-\$7	\$33
17	North TX HCS: Dallas	PCT	8268	637	\$556,902	\$67	\$874	\$68,381	-\$12	-\$457
17	South TX Veterans HCS: San Antonio	PCT	7373	777	\$567,026	\$77	\$730	\$169,042	\$12	-\$43
18	El Paso (TX) Veterans HCS	PCT	7068	572	\$390,690	\$55	\$683	\$93,835	\$13	\$104
18	New Mexico HCS (Albuquerque)	PCT	11286	1087	\$694,011	\$61	\$638	\$207,771	-\$10	-\$550
18	Phoenix, AZ	PCT	6902	487	\$437,454	\$63	\$898	-\$6,459	-\$33	-\$447
18	Southern AZ HCS (Tucson)	PCT	5026	501	\$344,469	\$69	\$688	\$28,421	-\$12	-\$176
19	Cheyenne, WY	PCT	1152	156	\$167,250	\$145	\$1,072	-\$86,897	\$46	\$155
19	Denver**	PCT	0	0	\$0	NA	NA	-\$284,084	NA	NA
19	Grand Junction, CO	PCT	2819	349	\$191,373	\$68	\$548	\$17,549	-\$83	-\$1,281
19	Salt Lake City (UT) HCS	PCT	10276	866	\$802,921	\$78	\$927	\$488,126	\$10	-\$102
20	Boise, ID	PCT	4509	393	\$729,395	\$162	\$1,856	\$281,045	\$66	\$688
20	Portland, OR	PCT	8421	840	\$780,595	\$93	\$929	\$441,391	-\$5	-\$209
20	Puget Sound (WA) HCS	PCT	32628	2492	\$1,949,148	\$60	\$782	\$1,099,946	-\$2	\$1
20	Spokane, WA*	PCT	3367	274	\$205,901	\$61	\$751	\$205,901	NA	NA
21	Honolulu, HI	PCT	5061	318	\$358,612	\$71	\$1,128	\$14,096	-\$19	-\$107
21	Northern CA HCS: (Sacramento)	PCT	1157	148	\$233,180	\$202	\$1,576	\$22,132	\$118	\$906
21	Palo Alto (CA) HCS: San Jose	PCT	7588	581	\$228,740	\$30	\$394	-\$68,224	-\$57	-\$865
21	San Francisco, CA	PCT	12844	1088	\$951,845	\$74	\$875	\$152,640	-\$53	-\$433
21	San Francisco, CA	SUPT	2911	94	\$254,407	\$87	\$2,706	-\$120,709	-\$11	-\$52
22	Greater Los Angeles (CA) HCS East LA	PCT	6258	484	\$384,398	\$61	\$794	-\$16,269	-\$15	-\$286
22	Greater Los Angeles (CA) HCS West LA*	PCT	5486	508	\$844,039	\$154	\$1,661	\$844,039	NA	NA
22	Loma Linda, CA	PCT	3012	173	\$143,074	\$48	\$827	-\$186,090	-\$62	-\$878
22	Loma Linda, CA	WSDTT	2115	199	\$251,299	\$119	\$1,263	-\$6,302	-\$6	-\$1,017
22	San Diego (CA) HCS CA	PCT	11345	831	\$536,283	\$47	\$645	\$199,608	-\$27	-\$139
ALL VA			563,150	44,300	\$42,924,372	\$76	\$969	\$11,513,982	-\$5	-\$215

† Direct Costs are All Other Dollars plus total Personal Dollars.

* Program was not open in FY 1996.

** Program was closed for all of FY 2001.

*** Due to administrative restructuring, data for the PCT and the SUPT are combined.

NA = not Applicable. NR = Not Reported. NC = Not Calculated because data were not reported.

Table 3-11. Costs for Specialized Intensive PTSD Programs, by VISN, FY 2001. †

	FY 2001					DIFFERENCE: FY 2001 - FY 1997		
VISN	#Of DAYS OF TREATMENT	# Of ADMISSIONS	DIRECT COST	COST PER DIEM	COST PER CAPITA	DIRECT COST	COST PER DIEM	COST PER CAPITA
1	15657	382	\$1,203,520	\$77	\$3,151	-\$66,830	-\$9	\$126
2	4001	254	\$629,281	\$157	\$2,477	-\$634,472	-\$163	-\$2,788
3	13320	330	\$1,883,316	\$141	\$5,707	-\$1,013,496	-\$11	\$168
4	14342	264	\$1,775,340	\$124	\$6,725	-\$39,742	\$8	\$1,897
5	15487	216	\$606,174	\$39	\$2,806	-\$89,683	-\$31	-\$273
6	9686	244	\$1,953,182	\$202	\$8,005	-\$1,620	-\$15	-\$243
7	6745	356	\$561,634	\$83	\$1,578	-\$3,328,672	-\$116	-\$3,219
8	7852	149	\$1,029,631	\$131	\$6,910	-\$502,251	-\$64	-\$4,271
10	6520	182	\$1,381,215	\$212	\$7,589	-\$93,114	\$81	\$795
11	8831	451	\$1,034,308	\$117	\$2,293	-\$279,349	-\$36	-\$2,175
12	16824	376	\$1,632,185	\$97	\$4,341	-\$21,792	-\$3	\$237
13	552	62	\$93,690	\$170	\$1,511	-\$217,789	-\$518	-\$4,978
14	1779	51	\$164,020	\$92	\$3,216	-\$559,885	\$12	-\$2,227
15	8567	112	\$1,327,510	\$155	\$11,853	\$406,031	\$71	\$3,551
16	12577	452	\$1,334,343	\$106	\$2,952	-\$1,839,940	-\$146	-\$5,581
17	5790	95	\$1,059,847	\$183	\$11,156	\$234,411	\$67	\$4,758
19	4115	157	\$541,092	\$131	\$3,446	-\$1,448,824	-\$95	-\$7,310
20	13807	619	\$2,158,229	\$156	\$3,487	-\$650,330	\$19	-\$514
21	15674	260	\$3,081,656	\$197	\$11,853	-\$380,809	\$15	\$2,444
22	0	0	\$0	NA	NA	-\$656,952	NA	NA
ALL VA	182126	5012	\$23,450,173	\$129	\$4,679	-\$11,185,107	-\$22	-\$1,080

Note: No Specialized Intensive Program was open in VISN 9 or VISN 18 for these fiscal years.

† Direct Costs are All Other Dollars plus total Personal Dollars.

NA=Not Applicable.

Table 3-12. Costs for Specialized Intensive PTSD Programs, by VA Facility, FY 2001. †

VISN	FACILITY	FY 2001					DIFFERENCE: FY2001 - FY 1997		
		# OF DAYS OF TREATMENT	ADMISSIONS	DIRECT COST†	COST PER DIEM	COST PER CAPITA	DIRECT COST	COST PER DIEM	COST PER CAPITA
1	Connecticut HCS: West Haven	3639	43	\$312,598	\$86	\$7,270	\$47,577	\$9	\$1,508
1	Northampton, MA	4396	108	\$502,738	\$114	\$4,655	\$248,692	\$78	\$2,324
1	Togus, ME*	7515	140	\$219,414	\$29	\$1,567	-\$207,815	-\$83	-\$670
1	White River Junction, VT*	107	91	\$168,770	\$1,577	\$1,855	-\$155,285	\$1,044	-\$2,525
2	Western NY HCS: Batavia	4001	254	\$629,281	\$157	\$2,477	-\$634,472	-\$163	-\$2,788
3	Bronx, NY**	0	0	\$0	NA	NA	-\$752,094	NA	NA
3	Hudson Valley (NY) HCS: Montrose	6350	158	\$959,216	\$151	\$6,071	\$41,357	\$13	\$972
3	New Jersey HCS: Lyons	6970	172	\$924,099	\$133	\$5,373	-\$302,758	\$1	-\$855
4	Clarksburg, WV	3244	69	\$534,698	\$165	\$7,749	\$47,939	-\$108	\$4,369
4	Coatesville, PA	11098	195	\$1,240,642	\$112	\$6,362	-\$87,681	\$16	\$637
5	Martinsburg, WV	14119	140	\$380,128	\$27	\$2,715	-\$25,362	-\$19	-\$581
5	Maryland HCS: Baltimore	1368	76	\$226,046	\$165	\$2,974	-\$64,321	-\$116	\$155
6	Salem, VA	4152	124	\$990,777	\$239	\$7,990	\$107,631	\$23	\$442
6	Salisbury, NC	5534	120	\$962,405	\$174	\$8,020	-\$109,252	-\$43	-\$910
7	Augusta, GA**	0	0	\$0	NA	NA	-\$2,224,614	NA	NA
7	Central AL Veterans HCS: Tuskegee**	0	0	\$0	NA	NA	-\$993,109	NA	NA
7	Tuscaloosa, AL*	6745	356	\$561,634	\$83	\$1,578	-\$110,949	-\$38	-\$2,379
8	Bay Pines, FL	3718	80	\$510,731	\$137	\$6,384	-\$68,940	-\$27	-\$1,243
8	Miami, FL	4134	69	\$518,900	\$126	\$7,520	-\$433,311	-\$95	-\$8,090
10	Brecksville, OH	198	42	\$360,684	\$1,822	\$8,588	\$145,359	\$1,758	\$4,102
10	Cincinnati, OH	1710	80	\$533,756	\$312	\$6,672	-\$289,155	\$86	-\$1,091
10	Dayton, OH	4612	60	\$486,775	\$106	\$8,113	\$50,682	\$4	\$1,191
11	Battle Creek, MI	8831	451	\$1,034,308	\$117	\$2,293	-\$279,349	-\$36	-\$2,175
12	Milwaukee, WI	4611	32	\$237,077	\$51	\$7,409	-\$12,986	\$3	-\$6,484
12	North Chicago, IL	8565	276	\$1,113,034	\$130	\$4,033	\$191,840	\$15	\$683
12	Tomah, WI	3648	68	\$282,074	\$77	\$4,148	-\$200,647	-\$68	-\$240
13	Minneapolis, MN*	552	62	\$93,690	\$170	\$1,511	-\$217,789	-\$518	-\$4,978
14	Central IA HCS: Des Moines	1779	51	\$164,020	\$92	\$3,216	-\$161,344	-\$45	-\$1,714
14	Central IA HCS: Knoxville **	0	0	\$0	NA	NA	-\$398,541	NA	NA
15	Eastern KS HCS: Topeka	8567	112	\$1,327,510	\$155	\$11,853	\$406,031	\$71	\$3,551
16	Central AR Veterans HCS (Little Rock)	7486	243	\$672,549	\$90	\$2,768	-\$1,257,668	-\$159	-\$10,274
16	Jackson, MS	2609	140	\$270,718	\$104	\$1,934	-\$133,711	-\$70	-\$1,302
16	New Orleans, LA	2482	69	\$391,076	\$158	\$5,668	-\$448,561	-\$178	-\$2,813
17	Central TX Veterans HCS: Waco	5790	95	\$1,059,847	\$183	\$11,156	\$234,411	\$67	\$4,758
19	Denver, CO	4115	157	\$541,092	\$131	\$3,446	-\$1,074,828	-\$156	-\$11,111
19	Sheridan, WY**	0	0	\$0	NA	NA	-\$373,996	NA	NA

Table 3-12. Costs for Specialized Intensive PTSD Programs, by VA Facility, FY 2001. †

VISN	FACILITY	FY 2001					DIFFERENCE: FY2001 - FY 1997		
		# OF DAYS OF TREATMENT	ADMISSIONS	DIRECT COST†	COST PER DIEM	COST PER CAPITA	DIRECT COST	COST PER DIEM	COST PER CAPITA
20	Alaska HCS (Anchorage)**	0	0	\$0	NA	NA	-\$286,628	NA	NA
20	Boise, ID	795	20	\$392,269	\$493	\$19,613	\$25,651	\$81	\$4,338
20	Puget Sound (WA) HCS: American Lake	6141	172	\$524,138	\$85	\$3,047	\$87,319	\$34	\$1,164
20	Puget Sound (WA) HCS: Seattle	3876	312	\$932,898	\$241	\$2,990	-\$43,186	-\$1	-\$411
20	Roseburg (OR) HCS	2995	115	\$308,925	\$103	\$2,686	-\$433,486	-\$121	-\$3,449
21	Hilo, HI	3399	56	\$928,909	\$273	\$16,588	\$167,899	\$79	\$8,132
21	Palo Alto (CA) HCS: Menlo Park	12275	204	\$2,152,747	\$175	\$10,553	-\$548,708	-\$3	\$835
22	Greater Los Angeles (CA) HCS**	0	0	\$0	NA	NA	-\$656,952	NA	NA
ALL VA		182126	5012	\$23,450,173	\$129	\$4,679	-\$11,185,106	-\$22	-\$1,080

Note: No Specialized Intensive Program was open in VISN 9 or VISN 18 for these fiscal years.

† Direct Costs are All Other Dollars plus total Personal Dollars.

NA=Not Applicable.

* For this facility FY 1998 data were used as baseline for computing differences because FY 1997 data were missing for one or more components.

** The Specialized Intensive PTSD program at this facility was closed for all of FY 2001.

PART IV: OUTCOME MONITORING OF SPECIALIZED INTENSIVE PTSD PROGRAMS

System-wide monitoring of health care outcomes has become an increasingly prominent feature of health care delivery in America, and will eventually constitute a cornerstone of the operation of the Department of Veterans Affairs health care system (Kizer, 1995, 1996; Veterans Health Administration, 1996). As our health care system has undergone a period of accelerating and unprecedented change, public officials, health care professionals, and the public have demanded objective evidence of the continuing quality and value of the care provided. Although controversial, health care "report cards" have been developed (and made public) by an increasing number of health care systems. The treatment of veterans suffering from Posttraumatic Stress Disorder (PTSD) due to their military experience is one of the highest VA priorities. In an earlier report (Fontana & Rosenheck, 1997b), we described our development of a report card for the treatment outcomes of the specialized intensive PTSD programs (SIPPs), as specified in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*. Readers who are interested in the technical aspects of the development of the report card should consult this earlier report (Fontana & Rosenheck, 1997b).

VISNs have been very active since FY 1996 in opening, closing and redesigning their intensive PTSD programs. At the same time, there has been increased interest in VA in comparing performance during the most recent fiscal year to a reference year. We use FY 1996 as the reference year for all outcome indices except Work. Due to a change in the assessment of Work from dollars earned to days worked, the earliest that we have data available for the latter measure is FY 1998. FY 1998, therefore, becomes the reference year for days worked. Similarly, we began collecting data concerning veterans' satisfaction with their treatment in FY 1997. That fiscal year, therefore, becomes the reference year for satisfaction.

The changes in program design have made it infeasible for us to continue to compare performance across fiscal years at the program level. Beginning with the Long Journey Home VII report (Fontana, Rosenheck et al., 1999), therefore, we shifted our presentation of performance data from the program level to the station level. We continue to present performance data at the VISN level, however, as in the past.

In response to requests from the field, this year we have reinstated the baseline and follow-up means in addition to the risk-adjusted follow-up means for the current fiscal year for each station and VISN. The risk-adjusted follow-up means constitute the presentation of the data that forms a part of VA's annual capacity report to Congress (cf., Office of Policy and Planning, 1999). We hope that expansion of the presentation of the outcome data to include baseline and follow-up means will enhance their utility for program planning.

In the sections that follow we describe the: (1) programs and time-period surveyed, (2) the stations surveyed and the adequacy of the data collected, (3) conditioning of the data to remove unwanted artifacts, (4) methods of risk-adjustment, (5) definition of the specific

measures of outcome and the significance of these outcomes nationwide, (6) patient satisfaction with specialized PTSD treatment nationwide, (7) identification of stations whose outcomes or satisfaction are significantly better or worse than average, (8) deriving a report card for outcomes by synthesizing several indices into a single index, and (9) limitations to the monitoring methodology and data.

Programs and Time-Period Surveyed

The monitoring protocol covers all *intensive* specialized PTSD programs: inpatient, residential and day hospitals (outpatient). The types of residential and inpatient programs that are included are the Evaluation and Brief Treatment PTSD Units (EBTPUs), PTSD Residential Rehabilitation Programs (PRRPs), PTSD Domiciliary Programs (PDPs) and Specialized Inpatient PTSD Units (SIPUs), including a Women's Trauma Recovery Program. More detailed descriptions of these programs can be found in previous NEPEC reports (Fontana, Rosenheck et al., 1993, 1995). Another change that we instituted in the Long Journey Home VII and subsequent reports is the definition of the time-period surveyed. In order to represent performance most accurately within a given fiscal year, we define the relevant performance to consist of clinical *outcomes* that occurred during the index fiscal year. The veterans comprising the sample for this report, therefore, are those whose four-month follow-up assessment after discharge was due during FY 2001. In all, there were 3,165 veterans who were enrolled in the monitoring protocol and were due for follow-up during FY 2001. Of these, 2,386 (75%) were actually followed-up.

Stations Surveyed and Adequacy of Data Collection

A total of 37 stations were surveyed. Confidence in conclusions drawn from our analyses rests upon the representativeness of the data upon which they are based. Representativeness is determined by the percentage of veterans who are followed up. The Special Emphasis Program goal for representativeness is a minimum of a 50% follow-up (VHA Directive 96-051, Program Measure #1). The number due for follow-up, the number actually followed up, and the percentage followed up are presented in Table 4-1 for each station. Data from the 35 stations meeting the minimum goal of 50% were retained for analyses of outcomes and satisfaction. These data included 3,076 veterans, 2,351 of which were followed up (76%). Data from the 2 stations failing to meet the SEP goal were deemed to be inadequate for providing representative conclusions and were not included in the analyses. For informational purposes, raw means for the outcome measures, unadjusted for risk factors or baseline levels, are presented in Table D-1 of Appendix D for the 2 stations submitting inadequate data.

Conditioning the Data

Several procedures are in place to ensure that the data are maximally complete and

accurate. The first step for a program new to the monitoring protocol is to designate one person (an evaluation director) who has overall responsibility for the implementation and ongoing operation of the protocol by program staff, and another person (a data manager) who has daily responsibility for the data collection and the submission of data to NEPEC. Each of these persons is sent a written manual describing the evaluation procedures, and the manual is reviewed with them orally by a member of the NEPEC staff. When data are submitted to NEPEC, they are put through a series of computerized screens for accuracy of answers and for timeliness of submission. Letters explaining errors and identifying overdue forms are mailed to the data manager of each program each week. NEPEC staff edits the data with the correct information as they are returned by the field staff. In order to maximize the quality and quantity of data, NEPEC staff follow up these letters with telephone calls to data managers and evaluation directors as needed. In cases where problems in participation in the monitoring protocol persist, letters detailing the problems are sent to medical center and/or VISN authorities requesting their assistance.

Correcting for Regression to the Mean

Once the data have been made maximally complete and accurate, one other step is necessary to condition them for analysis. Regression to the mean is one of the artifacts potentially affecting longitudinal data. Regression to the mean refers to the fact that scores at time 1 are often found to be closer to the mean at time 2, due to the less than perfect test-retest reliability of the measuring instrument. In situations where people start out more deviantly than the norm (as is most often the case with psychiatric patients entering treatment), some of the movement toward the norm over time may be due to regression to the mean rather than to the treatment programs themselves. Data can be examined to determine if substantial regression to the mean has occurred by correlating the scores at time 1 with the change from time 1 to time 2. If the correlation is statistically significant, substantial regression to the mean has occurred (cf., Speer, 1992). Examination of the monitoring data in this manner reveals that they are affected by regression to the mean. We remove the component of change attributable to regression to the mean, therefore, by transforming raw scores into "true scores" using the method of Jacobson & Truax (1991). True scores are derived by adjusting raw scores for the test-retest reliability of the measuring instrument according to the formula

$$T_j = \text{Rel}(X_j) + (1 - \text{Rel})M$$

where T represents the true score, Rel is the test-retest reliability, X is the raw score, and M is the mean.

Values for the test-retest reliabilities were obtained from an earlier study of specialized outpatient treatment for PTSD (Fontana & Rosenheck, 1996b). In that study, a stabilization period of symptoms and social functioning was observed beginning four months after the initiation of treatment. The correlations across a four-month interval during this period of no

change in the levels of symptoms or social functioning were used as the test-retest reliabilities. All analyses were performed on true scores, thereby maximizing the sensitivity of the analyses to programmatically induced change.

Determining the Quality of Outcomes

VHA Directive 96-051 specifies outcome goals for PTSD, substance abuse, and work in Population Measures 1, 2 and 3. We have introduced some technical modifications to the determination of whether these goals are met so that the methods used are consistent with the methods used elsewhere in the National Mental Health Program Performance Monitoring System (Rosenheck & DiLella, 1998; Kaspro et al., 1997; Seibyl et al., 1997). In addition, we have added violence as Population Measure 6, because it is the single most important disruption to social functioning. These changes have been instituted with the approval of the Clinical Quality Improvement Specialist in the Office of Performance and Quality, VA Headquarters.

As with the vast majority of medical conditions, absolute outcome standards have not been established for the treatment of PTSD. In the absence of such standards, we use the performance of the median VISN and median station nationwide as the reference point for evaluating the performance of the other VISNs and stations. For each clinical outcome and patient satisfaction, the risk-adjusted value for the median VISN or station is adopted as the reference point. The SEP goal for each measure of clinical outcome is that the outcome not be significantly worse than that of the median, or reference, VISN or station.

Risk Adjustment

A major challenge for all outcome monitoring efforts is posed by the inevitable differences among veterans treated at various stations at the time of admission. Such differences in sociodemographic and clinical characteristics can have a substantial influence on the amount of change that occurs during treatment. In addition, our inspection of prior data suggested that differences in the conditions under which data are collected at follow-up might affect outcomes differentially across stations. As of January 8, 1999 we modified our follow-up instrument so as to include questions concerning the conditions under which the data were collected. We found that if the follow-up data were collected by clinicians associated with the programs either in face-to-face contact or over the telephone, veterans' reports of their outcomes and their satisfaction were significantly higher than if the data were collected by mail or by face-to-face contact or telephone by nonclinicians who were associated with the programs. We recommend, therefore, that follow-up data *not* be collected by clinicians who are associated with the programs.

As a result of these influences, outcomes should not be compared simply and directly *across* VISNs or stations without adjusting for these influences. The procedure for doing this is commonly referred to as risk adjustment (Iezzoni, 1995). Thus, the average outcome and

satisfaction at each individual VISN or station is compared to that of the median VISN or station, after statistical adjustment for differences in patient characteristics at admission and conditions of follow-up data collection using multivariate methods. Individual VISNs or stations performing significantly better or worse than their respective median counterparts are identified for each outcome measure and satisfaction.

Data Analytic Strategy

The first step in the analytic process is to evaluate the significance of the change from baseline to follow-up for each of the outcome indices for each station. Paired-comparison t-tests are performed on the true-scored data to determine the significance of these changes. The means themselves and the significance of the differences between admission and four-month follow-up are presented in Tables 4-2 through 4-13.

The next step is to regress the scores at four-months follow-up on the scores at admission to produce a set of residual outcome scores. These residual scores represent outcomes adjusted for admission levels. Residual scores for each of the six outcome variables are then correlated with 25 different sociodemographic and clinical characteristics at the time of admission and with an index ordering the conditions of data collection at follow-up.

In the data set for this report, 12 characteristics were found to be correlated significantly ($p < .05$) with the residual scores for two or more of the outcome variables and, therefore, were retained for use as risk-adjusters in subsequent analyses. These characteristics are veterans' age, education, Latino ethnicity, being married, service connected for medical problems, prior suicide attempts, having a history of incarceration, having received friendly or hostile fire, number of comorbid psychiatric disorders, having current medical problems, having a history of hospitalization for psychiatric disorder or substance abuse, and the follow-up data having been collected by a clinician associated with the program. Six characteristics were found to be correlated significantly with the satisfaction ratings and were retained for use as risk-adjusters for analyses involving satisfaction: age, Latino ethnicity, being married, having a history of incarceration, having served in a warzone, and the follow-up data having been collected by a clinician associated with the program.

The third step in the analyses is to use analysis of covariance to generate risk-adjusted follow-up means for VISNs and stations for each clinical outcome and patient satisfaction. True-scored follow-up means, adjusted for risk factors, are presented for the six outcome indices for each VISN and station in Tables 4-2 through 4-13.

Then multiple regression analysis is employed to compare the outcomes and satisfaction for all VISNs or stations to that of the median VISN or station for each outcome and satisfaction. This analysis produced a regression coefficient for each VISN or station, representing the number of scale points that that VISN or station deviated from its median counterpart after risk adjustment. The scale points for clinical outcomes and satisfaction are presented in the metrics of

the instruments used to measure them. The regression coefficients are presented for outcomes in Tables 4-2 through 4-13 and for satisfaction in Tables 4-16 and 4-17 as the "Deviation of the Mean from the Median." Significance levels represent the probability that each deviation could have occurred by chance. For ease of identification, those VISNs and stations whose outcomes or satisfaction are significantly worse than that of their median counterpart are marked by an "X". As noted above, outcomes which are significantly worse than that of the median for the Short Mississippi Scale (Tables 4-2 and 4-3), the ASI Composite for Alcohol Abuse (Tables 4-6 and 4-7), the ASI Composite for Drug Abuse (Tables 4-8 and 4-9), or for Work (Tables 4-12 and 4-13) do not meet the goals for Population Measures 1, 2 and/or 3 in VHA Directive 96-051 as modified above.

Measures of Outcome

The baseline data for outcomes monitoring are collected by a self-report questionnaire at the time of admission to specialized PTSD treatment, and follow-up data by a parallel questionnaire four months after discharge. (Details of the monitoring protocol, the quality control procedures at NEPEC, and copies of the data collection forms can be found in Fontana and Rosenheck, 1997b.) Outcome is defined as the *change* in symptoms and functioning from the month preceding admission to the month preceding the four-month follow-up and is assessed in five domains: 1) PTSD symptoms, 2) alcohol abuse, 3) drug abuse, 4) violence, and 5) work.

PTSD Symptoms

Due to their particular significance in these specialized programs, PTSD symptoms are measured by two instruments: the Short Form of the Mississippi Scale for Combat-Related PTSD that has been validated in a large sample of outpatients (Fontana & Rosenheck, 1994) and a four-item PTSD Scale that has been specially constructed for program monitoring to assess: 1) intrusive thoughts, flashbacks or nightmares, 2) avoidance of reminders of the war, 3) feelings of numbness or emotional distance from other people, and 4) sleep disturbances, irritability or hyperarousal (Cronbach alpha=0.67). For the SIPP nationally, there was significant improvement in PTSD ($p<.0001$) as measured by both instruments. The true-scored Short Mississippi Scale decreased by 1.54 points (3.80%) from 40.55 to 39.01; and the true-scored PTSD Scale decreased by 1.07 points (6.28%) from 17.05 to 15.98. Both decreases are significant at $p<.0001$. The average length of stay in the SIPP nationally was 43.31 days ($sd=24.07$). Neither of these changes in PTSD symptoms were correlated significantly ($p<.05$) with length of stay: $r=.01$ for the Short Mississippi Scale and $r=.00$ for the PTSD Scale.

Alcohol Abuse and Drug Abuse

Alcohol abuse and drug abuse are measured by the composite indices from the Addiction Severity Index (McLellan et al., 1985), a widely used and well-validated measure of substance abuse outcomes. Nationally, there was a significant decrease in alcohol abuse ($p<.0001$) and

change in drug abuse ($p > .0001$). The true-scored alcohol abuse composite decreased by .01 points (8.33%) from .12 to .11; while the true-scored drug abuse composite decreased by .01 points (20%) from .050 to .04. Neither change in substance abuse was correlated significantly with length of stay: $r = .01$ for alcohol abuse and $r = .03$ for drug abuse.

Violence

Violence is measured by four items that were adapted from the National Vietnam Veterans Readjustment Study (Kulka et al., 1990): 1) destruction of property, 2) threatening someone with physical violence without a weapon, 3) threatening someone with a weapon, and 4) physically fighting with someone (Cronbach alpha = 0.71). Nationally, the true-scored violence scale decreased significantly ($p < .0001$) by .69 points (42.59%) from 1.62 to 0.93. The decrease in violence was not correlated significantly with length of stay ($r = -.02$).

Work

Work is measured as the number of days employed for pay during the 30 days preceding the interview. Nationally, there was a significant *decrease* in true-scored work outcomes ($p < .0001$). The true-scored number of days worked during the past 30 days decreased by 4.85 (69.29%) from 7.00 to 2.15 days. The decrease in days worked was not correlated significantly with length of stay ($r = -.03$).

Satisfaction with Services

The follow-up questionnaire was modified in June 1996 to permit the monitoring of veterans' satisfaction with the clinical services received. Four items, scored on 4-point and 5-point Likert scales, cohered as a highly internally consistent cluster (Cronbach alpha = .84). These items, based on the work of Attkisson et al. (1983), asked the veterans how satisfied they were with the care they received from the specialized PTSD program, how they would rate the care they received from the specialized PTSD program, whether they would choose to go to the specialized PTSD program again if they needed treatment, and whether they would recommend the specialized PTSD program to other veterans if they needed treatment. Satisfaction scores can range from 4 to 18. A mid-point score of 11 represents equally satisfied and dissatisfied ratings. Nationally, veterans gave the SIPP a rating of 15.69, indicating that overall they were satisfied with services. Satisfaction was not correlated significantly with length of stay ($r = .04$).

Satisfaction is an important dimension of quality of care in its own right. Only 10% of the explained variance in satisfaction ratings can be attributed to improved outcomes (Fontana & Rosenheck, 1999). Satisfaction and outcomes, therefore, should be considered as largely separate dimensions of quality of care.

A Report Card for Outcomes

Although performance assessment of PTSD treatment clearly requires consideration of multiple outcome domains, the complex results do not allow summary assessment of the performance of each station. The six outcome variables are therefore combined into a single index, analogous to the cumulative grade-point average, on a report card of outcome performance. To accomplish this synthesis, we had to resolve two questions: 1) how to combine the regression coefficients when they were derived from variables that were measured with different metrics, and 2) what weight to give the regression coefficients for the different variables in combining them.

We resolved the first problem by using the *standardized* regression coefficients for deviations from the median VISN or station. This converts the different metrics for each variable into the common metric of standard scores. In addition, this method has the advantage of taking the actual sample sizes and variabilities of the individual VISNs and stations into account. Additionally, we reversed the sign of the coefficient for Work so that the direction was the same as for symptoms, substance abuse and violence.

We resolved the second problem by giving the combined value of the two PTSD symptom outcomes equal weight to the combined value of the other four outcomes. This weighting was decided upon after consultation with national experts in PTSD treatment and VHA headquarters. There was a consensus that while a diverse range of outcomes was desirable, the specialized nature of these programs as PTSD programs warranted a heavier emphasis on the outcomes for PTSD symptoms than for other outcomes.

The standardized coefficients for the Short Mississippi Scale and the NEPEC PTSD Scale were thus summed and averaged, as were the standardized coefficients for Alcohol Abuse, Drug Abuse, Violence and Work. These two averages were themselves averaged to produce the Standardized Combined Mean for all the outcomes. Finally, the Standardized Combined Mean was ranked, with the lowest ranks assigned to VISNs and stations with the best outcomes and the highest ranks assigned to those with the worst outcomes. The ranks constitute a report card of the goodness of VISNs' and stations' outcome performance represented as a single index. These data can be found in Tables 4-14 and 4-15.

A Report Card for Satisfaction

The mean risk-adjusted satisfaction ratings are presented in Table 4-16 by VISN and in Table 4-17 for stations. Comparison of each VISN and station to its median counterpart yields deviation scores with associated significance levels. The deviation scores represent the number of satisfaction scale points that the satisfaction rating for each VISN or station differs from the satisfaction rating of the median VISN or station. VISNs and stations are ranked by their standardized deviation from the median from highest to lowest to provide an index comparable

to the single index for outcomes. These data are presented in Tables 4-16 and 4-17.

Limitations to the Monitoring Methodology

Several limitations of the data presented here deserve comment and consideration. First, it must be acknowledged that although this report presents one of the largest outcome assessment efforts of its type, the numbers of cases and the follow-up rates from some individual stations are smaller than optimal, even among those included in the comparisons as having submitted adequate data. Although the number of stations not reporting adequate data has declined from last year, there are still 2 stations did not submit sufficient data to be included in the comparisons. For these 2 stations, we are unable to make any reasonably stable or representative determination of either veterans' clinical outcomes or satisfaction with services. We are hopeful that data collection will continue to improve as VHA leadership emphasizes the value of the information available through the monitoring effort to the maintenance and improvement of the quality of clinical services in the new VA.

Second, it must be acknowledged that statistical risk adjustment, although widely used, is imperfect, and can never be as effective as random assignment in establishing equivalent groups. Since it will never be possible to randomly assign patients living in different localities to health care facilities (VA or otherwise), however, clinical performance evaluation must continue to develop within the limits of available risk adjustment technologies.

Third, instrumentation in large-scale outcome assessment efforts must be economical, and, in the area of psychiatric assessment, must typically rely on self-report data that are subject to misrepresentation. Some clinicians have expressed the specific concern that patients may underreport their improvement out of fear that reporting improvement will jeopardize their compensation status. The instruments used in the current effort have well-established psychometric properties and were selected because of their consistency with results that were found using more extensive assessment batteries in smaller scale studies (Fontana & Rosenheck, 1996a). Moreover, we conducted a study of the effects of compensation-seeking on treatment outcomes and found that there was no evidence of such effects among outpatients and among inpatients in programs of short to moderate lengths of stay (Fontana & Rosenheck, 1998). Only in long-stay programs (averaging 100 days) was there evidence of a significant compensation-seeking bias on outcomes. This compensation-seeking effect, along with generally poorer outcomes and poorer ratings of satisfaction, led us to suggest consideration of avoiding the implementation of long-stay programs.

Fourth, as noted above, only limited data are available on the nature of services delivered during intensive treatment, and no information is available on the quality of aftercare services. While this information might help to account for weaker outcomes at some stations, it would not alter the basic assessment of outcomes presented in this report. For a responsible, patient-oriented treatment agency, inpatient care cannot be divorced from outpatient care even if the care

is delivered through a different health care system. At this stage in the development of methods for outcomes monitoring, we do not yet have the tools to both identify problems and present definitive solutions. At this time, comparative outcome data can only suggest broad directions for improvement. Treatment modification and development must be based on clinical and administrative experience, and on familiarity with the patients and operating circumstances confronting each station.

Further Analyses and the Commitment to Quality

We plan to conduct further analyses to determine the possible role of various treatment factors in contributing to superior outcomes. Primary among them are length of stay, size of program and use of medications. In addition, we are nearing completion of a report on an intensive evaluation of the outcomes of the Women's Stress Disorder Treatment Teams. Also, in collaboration with the National Center for PTSD, we have completed data collection for the development of monitoring instruments for assessing the outcomes of specialized outpatient PTSD programs.

Providing effective treatment of military-related PTSD is a major priority for the Veterans Health Administration. Although techniques of outcomes monitoring and assessment are in an early stage of development, the implementation of a nationwide effort to assess outcomes of intensive treatment of PTSD is a major accomplishment for VA, and reflects a commitment in the new VA to maintaining high levels of quality, accountability, and health care value.

Table 4-1. Adequacy of Data

VISN	Station	# Follow-Ups Due in FY'01	# Follow-Ups Due that were Obtained	% Follow-Ups Due that were Obtained*
1	Northampton	63	53	84
1	Togus	101	71	70
1	West Haven	29	23	79
1	White River Junction	58	35	60
2	Batavia (Buffalo)	73	70	96
3	Lyons	114	87	76
3	Montrose	145	77	53
4	Clarksburg	45	27	60
4	Coatesville	170	127	75
5	Baltimore	72	33	46
5	Martinsburg	98	63	64
6	Salem	68	65	96
6	Salisbury	108	93	86
7	Tuscaloosa	182	161	88
8	Bay Pines	71	65	92
8	Miami	38	34	89
9				
10	Brecksville (Cleveland)	38	29	76
10	Cincinnati	63	57	90
10	Dayton	45	29	64
11	Battle Creek	151	110	73
12	Milwaukee	17	2	12
12	North Chicago	157	107	68
12	Tomah	49	37	76
13	Minneapolis**	17	9	53
14	Des Moines	34	31	91
15	Topeka	100	62	62
16	Jackson	58	48	83
16	New Orleans	54	53	98
16	North Little Rock	200	151	76
17	Waco	64	52	81
18				
19	Denver	55	50	91
20	American Lake (Tacoma)	106	82	77
20	Boise	24	19	79
20	Roseburg	68	38	56
20	Seattle	201	147	73
21	Hilo	50	39	78
21	Palo Alto	179	150	84
22				
ALL VA		3165	2386	75%

* Program Measure #1 for PTSD in VHA Directive 10-96-051. X indicates that SEP goal was not met and that data were not adequate for representative comparison with other stations.

** Program was closed for all or part of FY 2000.

Table 4-2. Means for PTSD (Short Miss.) by VISN

VISN	FY'01 Adm. Mean	FY'01 Foll. Mean	FY'01 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'01 Adj. Foll. Mean	FY'01 - FY'96 Difference	Dev. of FY'01 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	39.70	39.46	-0.24	40.92	39.64	-1.28	0.47	
2	40.19	38.91	-1.28 *	37.93	38.86	0.93	-0.31	
3	40.11	37.11	-3.00 *	36.56	37.47	0.91	-1.70	
4	40.75	38.64	-2.11 *	37.35	39.22	1.87	0.05	
5	41.03	38.82	-2.21 *	40.31	37.81	-2.50	-1.36	
6	41.62	39.39	-2.23 *	39.59	38.91	-0.68	-0.26	
7	39.88	37.84	-2.04 *	41.09	37.70	-3.39	-1.47	
8	41.16	40.04	-1.12 *	40.70	39.42	-1.28	0.25	
9				42.09				
10	39.95	39.84	-0.11	40.07	39.77	-0.30	0.60	
11	41.40	41.56	0.16	38.10	40.60	2.50	1.43	
12	40.33	40.17	-0.16	39.92	39.67	-0.25	0.50	
13#	38.13	39.20	1.07	41.46	39.17	-2.29	0.00	
14	39.50	36.91	-2.59 *	36.19	38.42	2.23	-0.75	
15	39.05	36.91	-2.14 *	38.13	40.51	2.38	1.34	
16	42.22	41.37	-0.85 *	40.01	40.42	0.41	1.25	
17	38.93	38.39	-0.54	37.35	39.56	2.21	0.39	
18				40.54				
19	41.21	31.97	-9.24 *	38.84	35.28	-3.56	-3.89	0.05
20	40.87	38.94	-1.93 *	38.87	38.29	-0.58	-0.88	
21	39.33	37.91	-1.42 *	38.89	38.83	-0.06	-0.34	
22				35.27				
ALL VA	40.55	39.01	-1.54 *	39.01	39.01	0.00		

Indicates the median VISN for FY 2001.

* Significant at p<.05.

** X indicates that outcome for FY 2001 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-3. Means for PTSD (Short Miss.) by Station

VISN	Station	FY'01 Adm. Mean	FY'01 Foll. Mean	FY'01 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'01 Adj. Foll. Mean	FY'01 - FY'96 Difference	Dev. of FY'01 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	39.57	38.41	-1.16	40.14	38.46	-1.68	-1.48	
1	Togus	40.03	40.49	0.46	41.07	40.24	-0.83	0.30	
1	West Haven	38.88	38.47	-0.41	41.00	39.28	-1.72	-0.66	
1	White River Junction	39.74	39.60	-0.14	41.49	39.97	-1.52	0.03	
2	Batavia (Buffalo)	40.19	38.91	-1.28	37.83	38.83	1.00	-1.11	
3	Bronx				38.94				
3	Lyons	39.61	34.81	-4.80	35.27	35.70	0.43	-4.24	0.0001
3	Montrose	40.67	39.68	-0.99	38.24	39.40	1.16	-0.54	
4	Clarksburg	42.51	43.71	1.20	33.10	41.98	8.88	2.04	X 0.03
4	Coatesville	40.37	37.57	-2.80	41.13	38.51	-2.62	-1.43	
5	Baltimore				40.40				
5	Martinsburg	41.03	38.82	-2.21	40.44	38.16	-2.28	-1.78	
6	Salem	41.62	40.02	-1.60	40.73	40.30	-0.43	0.36	
6	Salisbury	41.62	38.95	-2.67	37.29	37.87	0.58	-2.07	
7	Augusta				42.03				
7	Tuscaloosa	39.88	37.84	-2.04	37.66			-2.28	0.03
7	Tuskegee				39.38				
8	Bay Pines	41.56	39.27	-2.29	41.93	38.66	-3.27	-1.28	
8	Miami	40.40	41.53	1.13	39.40	41.24	1.84	1.30	
9	Louisville				41.92				
10	Brecksville (Cleveland)	39.68	38.41	-1.27	39.26	38.86	-0.40	-1.08	
10#	Cincinnati	39.71	39.60	-0.11	40.77	39.40	-1.37	-0.54	
10	Dayton	40.68	41.73	1.05	39.16	41.59	2.43	1.65	X 0.05
11	Battle Creek	41.40	41.56	0.16	38.11	40.65	2.54	0.71	
12	Milwaukee				36.70				
12	North Chicago	40.04	40.04	0.00	39.34	39.78	0.44	-0.16	
12	Tomah	41.19	40.55	-0.64	41.45	39.72	-1.73	-0.22	
13	Minneapolis	38.13	39.20	1.07	41.44	39.23	-2.21	-0.71	
14	Des Moines	39.50	36.91	-2.59	31.82	38.22	6.40	-1.72	
14	Knoxville				41.90				
15	Topeka	39.05	36.91	-2.14	38.18	40.19	2.01	0.25	
16	Jackson	42.53	41.75	-0.78	40.94	40.84	-0.10	0.90	
16	New Orleans	40.78	39.05	-1.73	39.98	39.55	-0.43	-0.39	
16	North Little Rock	42.63	42.07	-0.56	39.74	40.69	0.95	0.75	
17	Temple				39.55				
17	Waco	38.93	38.39	-0.54	36.71	39.54	2.83	-0.40	
18	Phoenix				40.59				
19	Denver	41.21	31.97	-9.24	38.33	34.75	-3.58	-5.19	0.0001
19	Sheridan				39.47				
20	American Lake	41.62	40.86	-0.76	40.44	40.04	-0.40	0.10	
20	Anchorage				34.55				
20	Boise	41.32	40.16	-1.16	42.46	39.24	-3.22	-0.70	
20	Portland				39.75				
20	Roseburg	39.10	40.36	1.26	35.25	40.35	5.10	0.41	
20	Seattle	40.85	37.34	-3.51	39.96	36.75	-3.21	-3.19	0.0005
21	Hilo	41.07	39.66	-1.41	39.92	39.38	-0.54	-0.56	
21	Palo Alto	38.88	37.46	-1.42	38.44	38.59	0.15	-1.35	
21	San Francisco				41.13				
22	West Los Angeles				35.38				
ALL VA		40.55	39.01	-1.54	39.01	39.01	0.00		

Indicates the median station for FY 2001.

* Significant at $p < .05$.** X indicates that outcome for FY 2001 was significantly worse ($p < .05$) than the median station; SEP goal was not met.

Table 4-4. Means for PTSD (NEPEC Scale) by VISN

VISN	FY'01 Adm. Mean	FY'01 Foll. Mean	FY'01 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'01 Adj. Foll. Mean	FY'01 - FY'96 Difference	Dev. of FY'01 Adj. Foll. Mean from the Median Mean**	Sig. Level
1#	16.93	16.13	-0.80 *	16.86	16.07	-0.79	0.00	0.05
2	17.01	16.13	-0.88 *	16.29	16.11	-0.18	0.04	
3	16.72	15.42	-1.30 *	15.31	15.59	0.28	-0.48	
4	16.88	15.88	-1.00 *	15.86	16.26	0.40	0.19	
5	17.03	15.89	-1.14 *	16.68	15.46	-1.22	-0.61	
6	17.42	15.88	-1.54 *	15.98	15.78	-0.20	-0.29	
7	16.49	15.94	-0.55 *	17.14	16.01	-1.13	-0.06	
8	17.23	16.58	-0.65 *	16.96	16.36	-0.60	0.29	
9				17.66				
10	17.04	15.90	-1.14 *	16.53	15.73	-0.80	-0.34	
11	17.48	16.94	-0.54 *	15.95	16.57	0.62	0.50	
12	17.03	16.53	-0.50 *	16.39	16.28	-0.11	0.21	
13	16.04	16.08	0.04	16.86	15.94	-0.92	-0.13	
14	16.73	15.69	-1.04 *	14.40	16.24	1.84	0.17	
15	16.71	14.86	-1.85 *	15.73	16.18	0.45	0.11	
16	17.51	16.62	-0.89 *	16.60	16.37	-0.23	0.30	0.004
17	16.60	15.88	-0.72 *	15.60	16.17	0.57	0.10	
18				16.63				
19	17.44	13.56	-3.88 *	16.30	14.93	-1.37	-1.14	
20	17.34	15.97	-1.37 *	16.13	15.64	-0.49	-0.43	0.05
21	16.64	15.55	-1.09 *	16.29	15.82	-0.47	-0.25	
22				13.91				
ALL VA	17.05	15.98	-1.07 *	16.15	15.99	-0.16		

Indicates the median VISN for FY 2001.

* Significant at p<.05.

** X indicates that outcome for FY 2001 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-5. Means for PTSD (NEPEC Scale) by Station

VISN	Station	FY'01 Adm. Mean	FY'01 Foll. Mean	FY'01 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'01 Adj. Foll. Mean	FY'01 - FY'96 Difference	Dev. of FY'01 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	17.20	16.00	-1.20 *	17.12	15.97	-1.15	-0.09	0.006
1	Togus	16.90	16.34	-0.56 *	16.87	16.19	-0.68	0.13	
1	West Haven	16.82	16.10	-0.72 *	16.76	16.09	-0.67	0.03	
1	White River Junction	16.65	15.94	-0.71 *	16.92	16.03	-0.89	-0.03	
2	Batavia (Buffalo)	17.01	16.13	-0.88 *	16.27	16.10	-0.17	0.04	
3	Bronx				15.81				
3	Lyons	16.85	14.63	-2.22 *	15.04	14.94	-0.10	-1.12	
3	Montrose	16.58	16.29	-0.29 *	15.59	16.30	0.71	0.24	
4	Clarksburg	17.39	17.37	-0.02 *	14.80	16.97	2.17	0.91	
4	Coatesville	16.77	15.56	-1.21 *	16.80	16.06	-0.74	0.00	
5	Baltimore				16.70				
5	Martinsburg	17.03	15.89	-1.14 *	16.76	15.60	-1.16	-0.46	
6	Salem	17.46	15.84	-1.62 *	16.06	16.02	-0.04	-0.04	
6	Salisbury	17.40	15.91	-1.49 *	15.84	15.57	-0.27	-0.49	
7	Augusta				17.57				
7	Tuscaloosa	16.49	15.94	-0.55 *		15.99		-0.07	
7	Tuskegee				16.41				
8	Bay Pines	17.58	16.51	-1.07 *	16.94	16.26	-0.68	0.20	
8	Miami	16.57	16.72	0.15 *	16.94	16.71	-0.23	0.65	
9	Louisville				17.59				
10	Brecksville (Cleveland)	17.26	15.59	-1.67 *	15.96	15.45	-0.51	-0.61	
10	Cincinnati	16.68	15.75	-0.93 *	16.92	15.64	-1.28	-0.42	
10	Dayton	17.53	16.51	-1.02 *	16.18	16.27	0.09	0.21	
11	Battle Creek	17.48	16.94	-0.54 *	15.96	16.59	0.63	0.53	
12	Milwaukee				13.97				
12	North Chicago	16.91	16.59	-0.32 *	16.42	16.40	-0.02	0.34	
12#	Tomah	17.35	16.38	-0.97 *	17.00	16.06	-0.94	0.00	
13	Minneapolis	16.04	16.08	0.04 *	16.87	15.98	-0.89	-0.08	
14	Des Moines	16.73	15.69	-1.04 *	12.27	16.16	3.89	0.10	
14	Knoxville				17.15				
15	Topeka	16.71	14.86	-1.85 *	15.74	16.05	0.31	-0.01	
16	Jackson	17.39	16.75	-0.64 *	16.82	16.67	-0.15	0.61	
16	New Orleans	16.53	15.53	-1.00 *	17.09	15.99	-1.10	-0.07	
16	North Little Rock	17.90	16.96	-0.94 *	16.33	16.44	0.11	0.38	
17	Temple				16.08				
17	Waco	16.60	15.88	-0.72 *	15.45	16.17	0.72	0.11	
18	Phoenix				16.66				
19	Denver	17.44	13.56	-3.88 *	16.36	14.72	-1.64	-1.34	0.007
19	Sheridan				16.13				
20	American Lake	17.18	16.76	-0.42 *	16.43	16.53	0.10	0.47	0.003
20	Anchorage				15.24				
20	Boise	18.22	16.95	-1.27 *	16.95	16.28	-0.67	0.22	
20	Portland				16.54				
20	Roseburg	16.89	16.39	-0.50 *	14.66	16.20	1.54	0.14	
20	Seattle	17.42	15.29	-2.13 *	16.62	14.95	-1.67	-1.11	
21	Hilo	16.93	15.73	-1.20 *	15.84	15.81	-0.03	-0.25	
21	Palo Alto	16.56	15.50	-1.06 *	16.18	15.79	-0.39	-0.27	
21	San Francisco				16.94				
22	West Los Angeles				13.92				
ALL VA		17.05	15.98	-1.07 *	16.15	15.99	-0.16		

Indicates the median station for FY 2001.

* Significant at p<.05.

** X indicates that outcome for FY 2001 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-6. Means for Alcohol Abuse (ASI) by VISN

VISN	FY'01 Adm. Mean	FY'01 Foll. Mean	FY'01 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'01 Adj. Foll. Mean	FY'01 - FY'96 Difference	Dev. of FY'01 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	0.12	0.09	-0.03 *	0.17	0.10	-0.07	-0.01	0.005
2	0.13	0.10	-0.03 *	0.18	0.10	-0.08	-0.01	
3	0.16	0.11	-0.05 *	0.14	0.10	-0.04	-0.01	
4	0.15	0.12	-0.03 *	0.17	0.12	-0.05	0.01	
5	0.12	0.11	-0.01	0.16	0.11	-0.05	0.00	
6#	0.09	0.10	0.01	0.15	0.11	-0.04	0.00	
7	0.08	0.07	-0.01 *	0.16	0.08	-0.08	-0.03	
8	0.12	0.10	-0.02 *	0.17	0.10	-0.07	-0.01	
9				0.15				
10	0.12	0.11	-0.01	0.18	0.11	-0.07	0.00	0.001
11	0.15	0.14	-0.01	0.17	0.14	-0.03	0.03 X	
12	0.12	0.11	-0.01	0.16	0.11	-0.05	0.00	
13	0.16	0.10	-0.06	0.18	0.09	-0.09	-0.02	
14	0.08	0.09	0.01	0.18	0.10	-0.08	-0.01	
15	0.17	0.13	-0.04 *	0.16	0.12	-0.04	0.01	
16	0.10	0.11	0.01	0.17	0.11	-0.06	0.00	
17	0.11	0.12	0.01	0.15	0.12	-0.03	0.01	
18				0.17				
19	0.14	0.09	-0.05 *	0.16	0.10	-0.06	-0.01	0.02
20	0.13	0.11	-0.02 *	0.16	0.11	-0.05	0.00	
21	0.13	0.12	-0.01	0.20	0.12	-0.08	0.01 X	
22				0.14				
ALL VA	0.12	0.11	-0.01 *	0.16	0.11	-0.05		

Indicates the median VISN for FY 2001.

* Significant at p<.05.

** X indicates that outcome for FY 2001 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-7. Means for Alcohol Abuse (ASI) by Station

VISN	Station	FY'01 Adm. Mean	FY'01 Foll. Mean	FY'01 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'01 Adj. Foll. Mean	FY'01 - FY'96 Difference	Dev. of FY'01 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	0.12	0.08	-0.04 *	0.15	0.08	-0.07	-0.02	
1	Togus	0.11	0.10	-0.01	0.17	0.10	-0.07	0.00	
1	West Haven	0.16	0.11	-0.05	0.19	0.11	-0.08	0.01	
1	White River Junction	0.10	0.10	0.00	0.18	0.11	-0.07	0.01	
2	Batavia (Buffalo)	0.13	0.10	-0.03 *	0.18	0.10	-0.08	0.00	
3	Bronx				0.17				
3	Lyons	0.13	0.10	-0.03	0.13	0.10	-0.03	0.00	
3	Montrose	0.20	0.12	-0.08 *	0.13	0.10	-0.03	0.00	
4	Clarksburg	0.10	0.12	0.02	0.14	0.13	-0.01	0.03	
4	Coatesville	0.15	0.11	-0.04 *	0.20	0.11	-0.09	0.01	
5	Baltimore				0.17				
5	Martinsburg	0.12	0.11	-0.01	0.16	0.11	-0.05	0.01	
6	Salem	0.09	0.10	0.01	0.14	0.11	-0.03	0.01	
6	Salisbury	0.09	0.10	0.01	0.17	0.10	-0.07	0.00	
7	Augusta				0.16				
7	Tuscaloosa	0.08	0.07	-0.01 *		0.08		-0.02	0.05
7	Tuskegee				0.16				
8	Bay Pines	0.12	0.09	-0.03	0.17	0.10	-0.07	0.00	
8	Miami	0.11	0.10	-0.01	0.17	0.10	-0.07	0.00	
9	Louisville				0.14				
10	Brecksville (Cleveland)	0.11	0.10	-0.01	0.16	0.09	-0.07	-0.01	
10#	Cincinnati	0.11	0.10	-0.01	0.19	0.10	-0.09	0.00	
10	Dayton	0.17	0.13	-0.04	0.18	0.12	-0.06	0.02	
11	Battle Creek	0.15	0.14	-0.01	0.17	0.14	-0.03	0.04	X 0.006
12	Milwaukee				0.11				
12	North Chicago	0.12	0.11	-0.01	0.16	0.10	-0.06	0.00	
12	Tomah	0.13	0.12	-0.01	0.17	0.12	-0.05	0.02	
13	Minneapolis	0.16	0.10	-0.06	0.18	0.10	-0.08	0.00	
14	Des Moines	0.08	0.09	0.01	0.18	0.10	-0.08	0.00	
14	Knoxville				0.18				
15	Topeka	0.17	0.13	-0.04 *	0.16	0.12	-0.04	0.02	
16	Jackson	0.11	0.09	-0.02	0.17	0.10	-0.07	0.00	
16	New Orleans	0.08	0.07	-0.01	0.15	0.08	-0.07	-0.02	0.05
16	North Little Rock	0.11	0.12	0.01	0.18	0.12	-0.06	0.02	
17	Temple				0.14				
17	Waco	0.11	0.12	0.01	0.15	0.12	-0.03	0.02	
18	Phoenix				0.17				
19	Denver	0.14	0.09	-0.05 *	0.16	0.09	-0.07	-0.10	
19	Sheridan				0.15				
20	American Lake	0.15	0.12	-0.03 *	0.16	0.11	-0.05	0.01	
20	Anchorage				0.18				
20	Boise	0.10	0.10	0.00	0.16	0.10	-0.06	0.00	
20	Portland				0.14				
20	Roseburg	0.10	0.09	-0.01	0.16	0.09	-0.07	-0.01	
20	Seattle	0.14	0.11	-0.03 *	0.17	0.11	-0.06	0.01	
21	Hilo	0.14	0.13	-0.01	0.25	0.13	-0.12	0.03	
21	Palo Alto	0.13	0.12	-0.01	0.19	0.12	-0.07	0.02	
21	San Francisco				0.22				
22	West Los Angeles				0.14				
ALL VA		0.12	0.11	-0.01 *	0.16	0.11	-0.05		

Indicates the median station for FY 2001.

* Significant at p<.05.

** X indicates that outcome for FY 2001 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-8. Means for Drug Abuse (ASI) by VISN

VISN	FY'01 Adm. Mean	FY'01 Foll. Mean	FY'01 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'01 Adj. Foll. Mean	FY'01 - FY'96 Difference	Dev. of FY'01 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	0.04	0.04	0.00	0.07	0.04	-0.03	-0.01	0.02
2	0.05	0.04	-0.01 *	0.08	0.04	-0.04	-0.01	
3	0.07	0.06	-0.01 *	0.06	0.05	-0.01	0.00	
4	0.06	0.05	-0.01 *	0.08	0.05	-0.03	0.00	
5	0.05	0.06	0.01	0.07	0.05	-0.02	0.00	
6	0.03	0.04	0.01 *	0.06	0.05	-0.01	0.00	
7	0.04	0.03	-0.01 *	0.07	0.03	-0.04	-0.02	0.0001
8	0.05	0.03	-0.02 *	0.07	0.03	-0.04	-0.02	0.0001
9				0.05				
10	0.04	0.04	0.00	0.07	0.04	-0.03	-0.01	0.03
11	0.06	0.06	0.00	0.07	0.06	-0.01	0.01 X	0.03
12	0.05	0.05	0.00	0.07	0.05	-0.02	0.00	
13	0.05	0.04	-0.01	0.08	0.04	-0.04	-0.01	
14	0.05	0.05	0.00	0.08	0.05	-0.03	0.00	
15	0.07	0.06	-0.01 *	0.06	0.06	0.00	0.01	
16	0.04	0.04	0.00	0.07	0.04	-0.03	-0.01	0.003
17	0.04	0.04	0.00	0.06	0.05	-0.01	0.00	
18				0.07				
19	0.05	0.04	-0.01 *	0.07	0.05	-0.02	0.00	
20	0.05	0.05	0.00	0.07	0.04	-0.03	-0.01	
21#	0.05	0.05	0.00	0.09	0.05	-0.04	0.00	
22				0.07				
ALL VA	0.05	0.04	-0.01 *	0.07	0.04	-0.03		

Indicates the median VISN for FY 2001.

* Significant at p<.05.

** X indicates that outcome for FY 2001 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-9. Means for Drug Abuse (ASI) by Station

VISN	Station	FY'01 Adm. Mean	FY'01 Foll. Mean	FY'01 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'01 Adj. Foll. Mean	FY'01 - FY'96 Difference	Dev. of FY'01 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	0.05	0.03	-0.02 *	0.06	0.03	-0.03	-0.02	
1	Togus	0.04	0.04	0.00	0.07	0.04	-0.03	-0.01	
1	West Haven	0.06	0.05	-0.01	0.08	0.05	-0.03	0.00	
1	White River Junction	0.04	0.04	0.00	0.07	0.05	-0.02	0.00	
2	Batavia (Buffalo)	0.05	0.04	-0.01 *	0.08	0.04	-0.04	-0.01	
3	Bronx				0.08				
3	Lyons	0.06	0.05	-0.01	0.06	0.05	-0.01	0.00	
3	Montrose	0.05	0.03	-0.02 *	0.06	0.05	-0.01	0.00	
4	Clarksburg	0.04	0.04	0.00	0.06	0.04	-0.02	-0.01	
4	Coatesville	0.06	0.05	-0.01 *	0.09	0.04	-0.05	-0.01	
5	Baltimore				0.07				
5	Martinsburg	0.05	0.06	0.01	0.07	0.05	-0.02	0.00	
6	Salem	0.04	0.05	0.01 *	0.06	0.05	-0.01	0.00	
6	Salisbury	0.03	0.04	0.01 *	0.07	0.05	-0.02	0.00	
7	Augusta				0.07				
7	Tuscaloosa	0.04	0.03	-0.01 *		0.03		-0.02	
7	Tuskegee				0.07				
8	Bay Pines	0.05	0.03	-0.02 *	0.07	0.03	-0.04	-0.02	
8	Miami	0.05	0.05	0.00	0.07	0.04	-0.03	-0.01	
9	Louisville				0.05				
10	Brecksville (Cleveland)	0.06	0.05	-0.01	0.07	0.04	-0.03	-0.01	0.0001 0.001
10	Cincinnati	0.03	0.04	0.01	0.07	0.04	-0.03	-0.01	
10	Dayton	0.04	0.04	0.00	0.08	0.05	-0.03	0.00	
11	Battle Creek	0.06	0.06	0.00	0.07	0.06	-0.01	0.01	
12	Milwaukee				0.05				
12#	North Chicago	0.05	0.05	0.00	0.07	0.05	-0.02	0.00	
12	Tomah	0.05	0.05	0.00	0.06	0.05	-0.01	0.00	
13	Minneapolis	0.05	0.04	-0.01	0.08	0.04	-0.04	-0.01	
14	Des Moines	0.05	0.05	0.00	0.08	0.05	-0.03	0.00	
14	Knoxville				0.08				
15	Topeka	0.07	0.06	-0.01 *	0.06	0.06	0.00	0.01	0.003
16	Jackson	0.05	0.04	-0.01 *	0.07	0.04	-0.03	-0.01	
16	New Orleans	0.03	0.02	-0.01 *	0.07	0.03	-0.04	-0.02	
16	North Little Rock	0.04	0.04	0.00	0.08	0.04	-0.04	-0.01	
17	Temple				0.06				
17	Waco	0.04	0.04	0.00	0.06	0.05	-0.01	0.00	
18	Phoenix				0.07				
19	Denver	0.05	0.04	-0.01 *	0.07	0.05	-0.02	0.00	
19	Sheridan				0.06				
20	American Lake	0.06	0.06	0.00	0.07	0.05	-0.02	0.00	
20	Anchorage				0.07				0.004
20	Boise	0.04	0.03	-0.01	0.08	0.04	-0.04	-0.01	
20	Portland				0.06				
20	Roseburg	0.04	0.04	0.00	0.07	0.04	-0.03	-0.01	
20	Seattle	0.05	0.04	-0.01	0.07	0.04	-0.03	-0.01	
21	Hilo	0.05	0.04	-0.01	0.06	0.04	-0.02	-0.01	
21	Palo Alto	0.05	0.05	0.00	0.09	0.05	-0.04	0.00	
21	San Francisco				0.10				
22	West Los Angeles				0.07				
ALL VA		0.05	0.04	-0.01 *	0.07	0.04	-0.03		

Indicates the median station for FY 2001.

* Significant at p<.05.

** X indicates that outcome for FY 2001 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-10. Means for Violence by VISN

VISN	FY'01 Adm. Mean	FY'01 Foll. Mean	FY'01 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'01 Adj. Foll. Mean	FY'01 - FY'96 Difference	Dev. of FY'01 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	1.43	0.90	-0.53 *	1.37	0.95	-0.42	0.02	0.04
2	1.42	0.76	-0.66 *	1.23	0.83	-0.40	-0.10	
3	1.71	0.82	-0.89 *	0.96	0.80	-0.16	-0.13	
4	1.72	0.98	-0.74 *	1.30	1.05	-0.25	0.12	
5	1.81	0.84	-0.97 *	1.30	0.71	-0.59	-0.22	
6	1.63	0.89	-0.74 *	1.19	0.90	-0.29	-0.03	
7	1.66	0.89	-0.77 *	1.16	0.87	-0.29	-0.06	
8	1.73	0.89	-0.84 *	1.39	0.84	-0.55	-0.09	
9				1.61				
10	1.72	1.08	-0.64 *	1.44	1.00	-0.44	0.07	0.03
11	1.81	1.23	-0.58 *	1.17	1.10	-0.07	0.17 X	
12	1.53	0.97	-0.56 *	1.29	0.93	-0.36	0.00	
13	1.22	1.12	-0.10	1.61	1.22	-0.39	0.29	
14	1.37	0.60	-0.77 *	1.10	0.73	-0.37	-0.20	
15	1.38	0.72	-0.66 *	1.13	1.00	-0.13	0.07	
16	1.89	1.14	-0.75 *	1.23	1.05	-0.18	0.12 X	0.05
17	1.53	0.94	-0.59 *	1.07	0.97	-0.10	0.04	
18				1.45				
19	1.57	0.33	-1.24 *	1.23	0.69	-0.54	-0.24	
20#	1.50	0.95	-0.55 *	1.20	0.93	-0.27	0.00	
21	1.43	0.87	-0.56 *	1.25	0.95	-0.30	0.02	
22				0.81				
ALL VA	1.62	0.93	-0.69 *	1.23	0.93	-0.30		

Indicates the median VISN for FY 2001.

* Significant at $p < .05$.** X indicates that outcome for FY 2001 was significantly worse ($p < .05$) than the median VISN; SEP goal was not met.

Table 4-11. Means for Violence by Station

VISN	Station	FY'01 Adm. Mean	FY'01 Foll. Mean	FY'01 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'01 Adj. Foll. Mean	FY'01 - FY'96 Difference	Dev. of FY'01 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	1.44	0.80	-0.64 *	1.38	0.84	-0.54	-0.11	0.02
1	Togus	1.44	0.92	-0.52 *	1.44	0.96	-0.48	0.01	
1	West Haven	1.36	0.91	-0.45 *	1.25	0.98	-0.27	0.03	
1	White River Junction	1.43	0.99	-0.44 *	1.57	1.08	-0.49	0.13	
2	Batavia (Buffalo)	1.42	0.76	-0.66 *	1.23	0.83	-0.40	-0.12	
3	Bronx				1.39				
3	Lyons	1.69	0.64	-1.05 *	0.80	0.65	-0.15	-0.30	
3	Montrose	1.74	1.01	-0.73 *	1.08	0.96	-0.12	0.01	
4	Clarksburg	1.73	1.27	-0.46 *	0.90	1.19	0.29	0.24	
4	Coatesville	1.72	0.93	-0.79 *	1.67	1.01	-0.66	0.06	
5	Baltimore				1.44				
5	Martinsburg	1.81	0.84	-0.97 *	1.25	0.74	-0.51	-0.21	
6	Salem	1.80	0.80	-1.00 *	1.30	0.82	-0.48	-0.13	
6	Salisbury	1.51	0.96	-0.55 *	1.01	0.94	-0.07	-0.01	
7	Augusta				1.03				
7	Tuscaloosa	1.66	0.89	-0.77 *		0.87		-0.08	
7	Tuskegee				1.41				
8	Bay Pines	1.73	0.83	-0.90 *	1.48	0.79	-0.69	-0.16	
8	Miami	1.72	1.01	-0.71 *	1.30	0.95	-0.35	0.00	
9	Louisville				1.61				
10	Brecksville (Cleveland)	1.74	1.33	-0.41 *	1.35	1.26	-0.09	0.31	
10	Cincinnati	1.67	0.97	-0.70 *	1.51	0.90	-0.61	-0.05	
10	Dayton	1.80	1.04	-0.76 *	1.39	0.95	-0.44	0.00	
11	Battle Creek	1.81	1.23	-0.58 *	1.17	1.11	-0.06	0.16	
12	Milwaukee				0.61				
12	North Chicago	1.57	0.96	-0.61 *	1.29	0.91	-0.38	-0.04	
12	Tomah	1.41	1.03	-0.38 *	1.46	1.00	-0.46	0.05	
13	Minneapolis	1.22	1.12	-0.10	1.60	1.23	-0.37	0.28	
14	Des Moines	1.37	0.60	-0.77 *	0.78	0.70	-0.08	-0.25	
14	Knoxville				1.51				
15#	Topeka	1.38	0.72	-0.66 *	1.13	0.95	-0.18	0.00	
16	Jackson	2.13	1.19	-0.94 *	1.47	1.06	-0.41	0.11	
16	New Orleans	1.69	0.94	-0.75 *	1.10	0.96	-0.14	0.01	
16	North Little Rock	1.89	1.19	-0.70 *	1.21	1.09	-0.12	0.14	
17	Temple				0.95				0.02
17	Waco	1.53	0.94	-0.59 *	1.10	0.97	-0.13	0.02	
18	Phoenix				1.45				
19	Denver	1.57	0.33	-1.24 *	1.17	0.62	-0.55	-0.33	
19	Sheridan				1.33				
20	American Lake	1.55	0.94	-0.61 *	1.12	0.90	-0.22	-0.05	
20	Anchorage				1.10				
20	Boise	1.49	0.87	-0.62 *	1.27	0.91	-0.36	-0.04	
20	Portland				1.33				
20	Roseburg	1.48	1.10	-0.38 *	1.17	1.12	-0.05	0.17	
20	Seattle	1.49	0.93	-0.56 *	1.20	0.91	-0.29	-0.04	
21	Hilo	1.85	1.31	-0.54 *	1.39	1.28	-0.11	0.33	X 0.03
21	Palo Alto	1.32	0.76	-0.56 *	1.24	0.85	-0.39	-0.10	
21	San Francisco				1.27				
22	West Los Angeles				0.81				
ALL VA		1.62	0.93	-0.69 *	1.23	0.93	-0.30		

Indicates the median station for FY 2001.

* Significant at $p < .05$.** X indicates that outcome for FY 2001 was significantly worse ($p < .05$) than the median station; SEP goal was not met.

No station was significantly worse than the median station for FY'01.

Table 4-12. Means for Work (Days) by VISN

VISN	FY'01 Adm. Mean	FY'01 Foll. Mean	FY'01 Diff. Foll. - Adm.*	FY'98 Adj. Foll. Mean	FY'01 Adj. Foll. Mean	FY'01 - FY'98 Difference	Dev. of FY'01 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	3.61	2.57	-1.04 *	2.82	2.53	-0.29	0.45	
2	3.64	3.00	-0.64	2.02	2.93	0.91	0.85	
3	3.20	2.93	-0.27	7.54	2.83	-4.71	0.75	
4	3.01	1.44	-1.57 *	2.15	1.33	-0.82	-0.75	
5	2.19	0.93	-1.26	3.14	0.82	-2.32	-1.26	
6	3.05	0.92	-2.13 *	1.59	1.27	-0.32	-0.81	
7	3.45	1.35	-2.10 *	1.92	1.39	-0.53	-0.69	
8	3.16	2.28	-0.88	2.70	2.13	-0.57	0.05	
9								
10	3.34	2.78	-0.56	4.12	2.86	-1.26	0.78	
11	2.36	2.21	-0.15	2.76	2.43	-0.33	0.35	
12	2.21	1.58	-0.63	1.62	1.91	0.29	-0.17	
13	5.57	0.26	-5.31	0.60	-0.61	-1.21	-2.69	
14	3.51	1.51	-2.00		1.56		-0.52	
15	3.93	1.34	-2.59 *	2.34	1.14	-1.20	-0.94	
16	4.08	2.92	-1.16 *	2.12	2.77	0.65	0.69	
17	3.04	2.15	-0.89	2.09	2.33	0.24	0.25	
18								
19	4.80	0.26	-4.54 *	2.61	-0.59	-3.20	-2.67	X 0.004
20	3.26	3.13	-0.13	2.69	3.10	0.41	1.02	0.04
21#	2.26	1.95	-0.31	1.96	2.08	0.12	0.00	
22				3.70				
ALL VA	7.00	2.15	-4.85 *	2.79	2.16	-0.63		

Indicates the median VISN for FY 2001.

* Significant at p<.05.

** X indicates that outcome for FY 2001 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-13. Means for Work (Days) by Station

VISN	Station	FY'01 Adm. Mean	FY'01 Foll. Mean	FY'01 Diff. Foll. - Adm.*	FY'98 Adj. Foll. Mean	FY'01 Adj. Foll. Mean	FY'01 - FY'98 Difference	Dev. of FY'01 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	6.16	3.38	-2.78 *	2.57	3.28	0.71	0.97	
1	Togus	2.37	2.06	-0.31		2.35		0.04	
1	West Haven	0.39	2.40	2.01	3.35	3.05	-0.30	0.74	
1	White River Junction	4.38	2.56	-1.82 *		1.78		-0.53	
2	Batavia (Buffalo)	3.64	3.00	-0.64	1.88	2.90	1.02	0.59	
3	Bronx				2.62				
3	Lyons	3.97	2.66	-1.31	11.22	2.62	-8.60	0.31	
3	Montrose	2.35	3.20	0.85	4.61	3.05	-1.56	0.74	
4	Clarksburg	2.67	0.94	-1.73	2.40	1.42	-0.98	-0.89	
4	Coatesville	3.08	1.55	-1.53 *	2.02	1.34	-0.68	-0.97	
5	Baltimore				3.11				
5	Martinsburg	2.19	0.93	-1.26	3.01	0.86	-2.15	-1.45	
6	Salem	2.41	1.06	-1.35	2.09	1.73	-0.36	-0.58	
6	Salisbury	3.50	0.83	-2.67 *	1.10	0.95	-0.15	-1.36	X 0.05
7	Augusta				1.42				
7	Tuscaloosa	3.45	1.35	-2.10 *	2.25	1.37		-0.94	
7	Tuskegee				2.16				
8	Bay Pines	3.54	1.84	-1.70 *	2.86	1.74	-1.12	-0.57	
8	Miami	2.43	3.11	0.68	2.48	2.92	0.44	0.61	
9	Louisville								
10	Brecksville (Cleveland)	4.33	2.53	-1.80	6.34	2.34	-4.00	0.03	
10	Cincinnati	3.64	3.79	0.15	2.95	3.67	0.72	1.36	
10	Dayton	1.75	1.02	-0.73	3.82	1.70	-2.12	-0.61	
11	Battle Creek	2.36	2.21	-0.15	2.85	2.39	-0.46	0.08	
12	Milwaukee								
12	North Chicago	2.03	1.52	-0.51	1.40	1.82	0.42	-0.49	
12	Tomah	2.74	1.73	-1.01	2.16	2.07	-0.09	-0.24	
13	Minneapolis	5.57	0.26	-5.31	0.59	-0.65	-1.24	-2.96	
14	Des Moines	3.51	1.51	-2.00		1.58		-0.73	
14	Knoxville								
15	Topeka	3.93	1.34	-2.59 *	2.26	1.28	-0.98	-1.03	
16	Jackson	3.74	2.46	-1.28	0.91	2.72	1.81	0.41	
16	New Orleans	7.39	5.44	-1.95 *	2.05	4.16	2.11	1.85	
16#	North Little Rock	3.03	2.17	-0.86	2.35	2.31	-0.04	0.00	0.03
17	Temple								
17	Waco	3.04	2.15	-0.89	2.12	2.34	0.22	0.03	
18	Phoenix								
19	Denver	4.80	0.26	-4.54 *		-0.45		-2.76	X 0.006
19	Sheridan				2.69				
20	American Lake	2.71	2.87	0.16	2.27	2.90	0.63	0.59	
20	Anchorage				9.58				
20	Boise	3.67	4.29	0.62	1.12	3.84	2.72	1.53	
20	Portland								
20	Roseburg	4.05	3.52	-0.53	3.36	2.97	-0.39	0.66	
20	Seattle	3.32	3.03	-0.29	2.13	3.11	0.98	0.80	
21	Hilo	1.24	1.61	0.37	2.47	2.22	-0.25	-0.09	
21	Palo Alto	2.53	2.04	-0.49	1.82	2.04	0.22	-0.27	
21	San Francisco								
22	West Los Angeles				3.76				
ALL VA		7.00	2.15	-4.85 *	2.79	2.16	-0.63		

Indicates the median station for FY 2001.

* Significant at p<.05.

** X indicates that outcome for FY 2001 was significantly worse (p<.05) than the median station; SEP goal was not met.

No station was significantly worse than the median station for FY'01.

Table 4-14. Outcomes Report Card by VISN

VISN	Stand. Miss.	Stand. NEPEC	Stand. Alc.	Stand. Drug	Stand. Viol.	Stand. Work (rev.)	Stand. PTSD M	Stand. Other M	Stand. Comb. M	<i>Rank Comb. M</i>
1	0.02	0.00	-0.02	-0.06	0.01	-0.02	0.010	-0.023	-0.013	<i>10</i>
2	-0.01	0.00	0.00	-0.03	-0.02	-0.03	-0.005	-0.020	-0.025	<i>6</i>
3	-0.08	-0.05	-0.01	0.01	-0.04	-0.03	-0.065	-0.018	-0.083	<i>2</i>
4	0.00	0.02	0.03	0.02	0.04	0.03	0.010	0.030	0.040	<i>17</i>
5	-0.04	-0.04	0.00	0.00	-0.05	0.04	-0.040	-0.003	-0.043	<i>5</i>
6	-0.01	-0.03	0.00	-0.01	-0.01	0.04	-0.020	0.005	-0.015	<i>8</i>
7	-0.06	-0.01	-0.08	-0.14	-0.02	0.03	-0.035	-0.053	-0.088	<i>1</i>
8	0.01	0.03	-0.02	-0.09	-0.02	0.00	0.020	-0.033	-0.013	<i>10</i>
10	0.02	-0.03	0.00	-0.05	0.02	-0.03	-0.005	-0.015	-0.020	<i>7</i>
11	0.05	0.05	0.09	0.06	0.05	-0.01	0.050	0.048	0.098	<i>19</i>
12	0.02	0.02	0.01	-0.02	0.00	0.01	0.020	0.000	0.020	<i>15</i>
13	0.00	0.00	-0.01	-0.01	0.02	0.03	0.000	0.008	0.008	<i>13</i>
14	-0.02	0.01	-0.01	0.00	-0.03	0.01	-0.005	-0.008	-0.013	<i>10</i>
15	0.04	0.01	0.03	0.03	0.02	0.03	0.025	0.028	0.053	<i>18</i>
16	0.07	0.04	0.01	-0.09	0.05	-0.04	0.055	-0.018	0.038	<i>16</i>
17	0.01	0.01	0.03	-0.02	0.01	-0.01	0.010	0.003	0.013	<i>14</i>
19	-0.10	-0.07	-0.01	0.01	-0.04	0.07	-0.085	0.008	-0.078	<i>4</i>
20	-0.05	-0.06	0.00	-0.04	0.00	-0.06	-0.055	-0.025	-0.080	<i>3</i>
21	-0.02	-0.03	0.07	0.00	0.01	0.00	-0.025	0.020	-0.005	<i>12</i>
MEAN	-0.01	-0.01	0.01	-0.02	0.00	0.00	-0.007	-0.003	-0.011	
STD	0.04	0.03	0.04	0.05	0.03	0.03	0.037	0.024	0.049	

Table 4-15. Outcomes Report Card by Station

VISN	Station	Stand. Miss.	Stand. NEPEC	Stand. Alc.	Stand. Drug	Stand. Viol.	Stand. Work (rev.)	Stand. PTSD M	Stand. Other M	Stand. Comb. M	Rank Comb. M
1	Northampton	-0.02	0.00	-0.04	-0.04	-0.02	-0.02	-0.010	-0.030	-0.040	6
1	Togus	0.03	0.01	0.00	-0.04	0.00	0.00	0.020	-0.010	0.010	18
1	West Haven	0.00	0.00	0.00	0.01	0.00	-0.01	0.000	0.000	0.000	16
1	White River Junction	0.01	0.00	0.01	0.00	0.02	0.01	0.005	0.010	0.015	22
2	Batavia (Buffalo)	-0.02	0.00	0.00	-0.01	-0.03	-0.02	-0.010	-0.015	-0.025	10
3	Lyons	-0.12	-0.09	-0.01	0.03	-0.08	-0.01	-0.105	-0.018	-0.123	2
3	Montrose	0.00	0.02	0.00	0.03	0.00	-0.02	0.010	0.003	0.013	20
4	Clarksburg	0.05	0.04	0.04	-0.01	0.03	0.02	0.045	0.020	0.065	34
4	Coatesville	-0.03	0.00	0.02	0.05	0.02	0.04	-0.015	0.033	0.018	23.5
5	Martinsburg	-0.03	-0.03	0.00	0.03	-0.04	0.04	-0.030	0.008	-0.023	11
6	Salem	0.03	0.00	0.00	0.02	-0.03	0.02	0.015	0.003	0.018	23.5
6	Salisbury	-0.05	-0.04	0.00	0.01	0.00	0.05	-0.045	0.015	-0.030	9
7	Tuscaloosa	-0.08	-0.01	-0.08	-0.11	-0.03	0.04	-0.045	-0.045	-0.090	4
8	Bay Pines	-0.02	0.01	-0.02	-0.08	-0.03	0.02	-0.005	-0.028	-0.033	8
8	Miami	0.04	0.03	-0.01	-0.01	0.00	-0.01	0.035	-0.008	0.028	28
10	Brecksville (Cleveland)	-0.01	-0.03	-0.02	-0.01	0.05	0.00	-0.020	0.005	-0.015	12.5
10	Cincinnati	0.00	-0.03	0.00	-0.03	-0.01	-0.04	-0.015	-0.020	-0.035	7
10	Dayton	0.04	0.01	0.03	0.00	0.00	0.01	0.025	0.010	0.035	30.5
11	Battle Creek	0.05	0.05	0.09	0.08	0.04	0.00	0.050	0.053	0.103	35
12	North Chicago	0.01	0.03	0.00	0.00	-0.01	0.02	0.020	0.003	0.023	26.5
12	Tomah	0.01	0.00	0.03	0.02	0.01	0.01	0.005	0.018	0.023	26.5
13	Minneapolis	0.00	0.00	-0.01	-0.01	0.02	0.03	0.000	0.008	0.008	17
14	Des Moines	-0.02	0.00	-0.01	0.02	-0.04	0.01	-0.010	-0.005	-0.015	12.5
15	Topeka	0.02	0.00	0.02	0.05	0.00	0.03	0.010	0.025	0.035	30.5
16	Jackson	0.04	0.04	-0.02	-0.03	0.02	-0.01	0.040	-0.010	0.030	29
16	New Orleans	0.00	0.00	-0.06	-0.07	0.00	-0.05	0.000	-0.045	-0.045	5
16	North Little Rock	0.06	0.00	0.06	-0.01	0.05	0.00	0.030	0.025	0.055	33
17	Waco	0.00	0.01	0.03	0.00	0.00	0.00	0.005	0.008	0.013	20
19	Denver	-0.12	-0.08	-0.02	0.02	-0.06	0.07	-0.100	0.003	-0.098	3
20	American Lake (Tacoma)	0.02	0.04	0.02	0.04	-0.01	-0.02	0.030	0.008	0.038	32
20	Boise	0.00	0.01	0.00	-0.02	0.00	-0.02	0.005	-0.010	-0.005	15
20	Roseburg	0.02	0.01	-0.02	-0.01	0.03	-0.01	0.015	-0.003	0.013	20
20	Seattle	-0.11	-0.12	0.01	-0.02	-0.01	-0.03	-0.115	-0.013	-0.128	1
21	Hilo	0.00	-0.01	0.04	0.00	0.06	0.00	-0.005	0.025	0.020	25
21	Palo Alto	-0.03	-0.03	0.06	0.04	-0.03	0.01	-0.030	0.020	-0.010	14
MEAN		-0.01	0.00	0.01	0.00	0.00	0.01	-0.005	0.002	-0.003	
STD		0.05	0.04	0.03	0.04	0.03	0.03	0.040	0.020	0.050	

Table 4-16. Satisfaction with Treatment by VISN

VISN	FY 1997 Adj. Mean	FY 2001 Adj. Mean	FY'01 - FY'97	Deviation of FY'01 Mean from the Median Mean*	Significance Level	Rank
1	16.01	16.13	0.12	0.39	0.0001 X 0.0001	6
2		16.32		0.58		3
3	16.48	15.70	-0.78	-0.04		11
4	16.62	16.30	-0.32	0.56		4
5	15.68	15.16	-0.52	-0.58		17
6	17.23	16.99	-0.24	1.25		2
7	15.29	14.20	-1.09	-1.54		19
8	15.67	15.61	-0.06	-0.13		13
9						
10#	15.07	15.74	0.67	0.00		10
11	15.63	15.41	-0.22	-0.33	0.0001	14
12	15.76	16.28	0.52	0.54		5
13	12.49	14.23	1.74	-1.51		18
14		16.11		0.37		7
15	17.27	15.79	-1.48	0.05		9
16	16.16	15.63	-0.53	-0.11		12
17	15.18	15.23	0.05	-0.51		16
18						
19	15.18	17.53	2.35	1.79		1
20	14.74	15.34	0.60	-0.40		15
21	14.84	16.00	1.16	0.26		8
22						
ALL VA	15.69	15.78	0.09			

Indicates the median VISN for FY 2000.

* X indicates that satisfaction for FY 2000 was significantly worse ($p < .05$) than for the median VISN.

Table 4-17. Satisfaction with Treatment by Station

VISN	Station	FY 1997 Adj. Mean	FY 2001 Adj. Mean	FY'01-FY'97	Deviation of FY'01 Mean from the Median Mean*	Significance Level	Rank
1	Northampton	17.44	16.83	-0.61	0.97	0.05	6.5
1	Togus		16.09		0.23		14
1	West Haven	16.03	16.35	0.32	0.49		11
1	White River Junction		15.44		-0.42		26
2	Batavia (Buffalo)		16.34		0.48		12
3	Bronx	15.84					
3	Lyons	17.80	15.83	-1.97	-0.03		20
3	Montrose	15.41	15.54	0.13	-0.32		23.5
4	Clarksburg	16.52	15.92	-0.60	0.06		17
4	Coatesville		16.43		0.57	0.05	10
5	Baltimore	14.33					
5	Martinsburg	16.63	15.14	-1.49	-0.72	X 0.05	29
6	Salem	17.26	17.19	-0.07	1.33	0.0002	2
6	Salisbury	17.12	16.87	-0.25	1.01	0.002	5
7	Augusta	15.25					
7	Tuscaloosa	15.06	14.21	-0.85	-1.65	X 0.0001	33
7	Tuskegee	15.67					
8	Bay Pines	15.05	15.63	0.58	-0.23		22
8	Miami	16.39	15.54	-0.85	-0.32		23.5
10	Brecksville (Cleveland)	14.75	15.94	1.19	0.08		16
10	Cincinnati	14.92	16.48	1.56	0.62		9
10	Dayton	15.60	14.00	-1.60	-1.86	X 0.0001	35
11	Battle Creek	15.59	15.38	-0.21	-0.48		27
12	Milwaukee						
12	North Chicago	16.19	16.83	0.64	0.97	0.002	6.5
12	Tomah	15.05	14.66	-0.39	-1.20	X 0.006	32
13	Minneapolis	12.42	14.18	1.76	-1.68	X 0.05	34
14	Des Moines		16.11		0.25		13
15	Topeka	17.47	15.86	-1.61	0.00		18.5
16	Jackson		15.77		-0.09		21
16	New Orleans	16.49	15.99	-0.50	0.13		15
16	North Little Rock	15.93	15.45	-0.48	-0.41		25
17	Waco	15.07	15.22	0.15	-0.64		28
19	Denver		17.59		1.73	0.0001	1
19	Sheridan	15.30					
20	American Lake (Tacoma)	13.91	14.77	0.86	-1.09	X 0.0007	31
20	Boise	17.11	17.08	-0.03	1.22	0.04	3
20	Roseburg	16.14	16.89	0.75	1.03	0.02	4
20	Seattle	13.74	15.00	1.26	-0.86	X 0.002	30
21#	Palo Alto	14.84	15.86	1.02	0.00		18.5
21	Hilo	14.99	16.50	1.51	0.64		8
ALL VA		15.69	15.78	0.09			

Indicates the median station for FY 2000.

* X indicates that satisfaction for FY 2000 was significantly worse ($p < .05$) than for the median station.

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Appendix A

Changes in Treatment of PTSD in the Department of Veterans Affairs, FY 1995 and FY 2001

Changes in Treatment of PTSD in the Department of Veterans Affairs, FY 1995 and FY 2001¹

The past six years have been a period of major change in the Veterans Health Administration (VHA). Tables presented in this report primarily focus on changes during the past year. The tables presented in this appendix, in contrast, illustrate changes in the six years since the VA reorganization was implemented.

Table A1 shows changes from FY 1995-FY 2001 in the number of programs operating in each VISN. Altogether there was a net loss of 3 SUPTs, 19 SIPUs, 4 PSUs, and 12 EBTPUs; and net gain of 6 PTSD Doms, 12 PCTs, 4 PRRPs, 7 PTSD Day Hospitals, 1 WSDTT, and 1 PTSD Day Hospital with a substance abuse component.

Table A2 presents summary workload data on the work of specialized PTSD outpatient clinics: the PTSD Clinical Teams (PCT) program, the Substance Use PTSD Teams (SUPT) program, and the Women's Stress Disorder Treatment Teams (WSDTT) program. Overall these programs saw 86% more patients in FY 2001 than in FY 1995 although the intensity of contact decreased (-9.3%).

Table A3 presents data on changes from FY 1995-FY 2001 in beds occupied during the end-of-the-year national census. There was a 57.9% decline in the total number of general psychiatry beds in VA; a 32.4% decrease in the proportion of beds used for PTSD treatment; and a 45.8% decline in length of stay. There was an 11.9% increase in the total number of domiciliary and PRRP beds in VA; a 107.5% increase in the proportion of beds used for PTSD treatment; and a 51.8% decline in length of stay.

Tables A4 and A5 present data on the change in the number and percent of patients receiving inpatient and residential treatment for PTSD. VA provided a total of 7,597 episodes of inpatient treatment for PTSD in FY 2001 compared to 14,849 in FY 1995, a 48.8% decrease. The average length of stay declined from 27.2 days in FY 1995 to 13.6 days in FY 2001, a 50% reduction. VA provided a total of 3,580 episodes of domiciliary and PRRP treatment for PTSD in FY 2001 compared to 715 in FY 1995, a 400.7% increase. The average length of stay declined from 112.2 days in FY 1995 to 52.9 days in FY 2001, a 52.8% reduction.

¹ FY 1995 data do not include PRRP care.

Table A1. VA SPECIALIZED PTSD PROGRAMS BY VISN: FY 1995, FY 2001 and FY 1995-2001 change.

Fiscal Year 2001												SUM
VISN	PCT	SUPT	WSDTT	SIPU	PSU	PTSD Dom	PRRP	EBTPU	DH	WTRP	OTHER	VISN
1	6	2	1	1	0	0	1	0	2	0	0	13
2	2	0	0	0	0	0	1	0	0	0	0	3
3	5	0	0	0	0	1	1	0	0	0	0	7
4	3	1	0	0	0	0	2	0	0	0	0	6
5	3	0	0	0	0	1	0	1	0	0	0	5
6	5	0	0	2	0	0	0	0	0	0	0	7
7	7	0	0	0	0	0	0	0	1	0	0	8
8	4	1	0	0	0	1	1	0	0	0	0	7
9	4	0	0	0	0	0	0	0	0	0	0	4
10	5	0	1	0	0	0	0	0	3	0	1	10
11	5	0	0	1	0	0	0	0	0	0	0	6
12	2	0	1	0	0	1	2	0	0	0	0	6
13	3	1	0	0	0	0	0	0	0	0	0	4
14	4	0	0	0	0	0	1	0	0	0	0	5
15	5	0	0	1	0	0	0	0	0	0	0	6
16	7	0	1	0	0	1	2	1	0	0	0	12
17	5	0	0	0	0	0	1	0	0	0	0	6
18	5	0	0	0	0	0	0	1	0	0	0	6
19	3	0	0	0	0	0	0	0	1	0	0	4
20	4	0	0	1	0	1	0	2	0	0	0	8
21	4	1	0	0	0	0	2	0	0	1	0	8
22	5	0	1	0	0	0	0	0	0	0	0	6
ALL VA	96	6	5	6	0	6	14	5	7	1	1	147
MEAN	4	0	0	0	0	0	1	0	0	0	0	7
SD	1	1	0	1	0	0	1	1	1	0	0	2

Fiscal Year 1995												SUM
VISN	PCT	SUPT	WSDTT	SIPU	PSU	PTSD Dom	PRRP	EBTPU	DH	WTRP	OTHER	VISN
1	6	2	1	3	0	0	1	2	0	0	0	15
2	2	0	0	0	0	0	0	1	0	0	0	3
3	4	0	0	2	1	0	0	1	0	0	0	8
4	4	1	0	1	0	0	0	1	0	0	0	7
5	3	0	0	0	0	0	1	1	0	0	0	5
6	5	0	0	2	0	0	0	0	0	0	0	7
7	5	0	0	3	0	0	0	0	0	0	0	8
8	4	1	0	2	0	0	0	0	0	0	0	7
9	6	0	0	0	0	0	0	0	0	0	0	6
10	1	0	1	1	0	0	1	1	0	0	0	5
11	4	0	0	2	0	0	0	0	0	0	0	6
12	3	0	0	2	1	0	0	0	0	0	0	6
13	3	1	0	0	0	0	0	1	0	0	0	5
14	3	1	0	0	0	0	1	1	0	0	0	6
15	4	0	0	1	0	0	0	0	0	0	0	5
16	5	1	1	1	1	0	0	2	0	0	0	11
17	4	0	0	1	0	0	1	1	0	0	0	7
18	4	0	0	1	0	0	0	0	0	0	0	5
19	4	0	0	1	0	0	1	1	0	0	0	7
20	3	1	0	1	0	0	3	3	0	0	0	11
21	4	1	0	0	1	0	0	1	0	1	0	8
22	3	0	1	1	0	0	1	0	0	0	0	6
ALL VA	84	9	4	25	4	0	10	17	0	1	0	154
MEAN	4	0	0	1	0	0	0	1	0	0	0	7
SD	1	1	0	1	0	0	1	1	0	0	0	3

Change in number of programs												SUM
VISN	PCT	SUPT	WSDTT	SIPU	PSU	PTSD Dom	PRRP	EBTPU	DH	WTRP	OTHER	VISN
1	0	0	0	-2	0	0	0	-2	2	0	0	-2
2	0	0	0	0	0	0	1	-1	0	0	0	0
3	1	0	0	-2	-1	1	1	-1	0	0	0	-1
4	-1	0	0	-1	0	0	2	-1	0	0	0	-1
5	0	0	0	0	0	1	-1	0	0	0	0	0
6	0	0	0	0	0	0	0	0	0	0	0	0
7	2	0	0	-3	0	0	0	0	1	0	0	0
8	0	0	0	-2	0	1	1	0	0	0	0	0
9	-2	0	0	0	0	0	0	0	0	0	0	-2
10	4	0	0	-1	0	0	-1	-1	3	0	1	5
11	1	0	0	-1	0	0	0	0	0	0	0	0
12	-1	0	1	-2	-1	1	2	0	0	0	0	0
13	0	0	0	0	0	0	0	-1	0	0	0	-1
14	1	-1	0	0	0	0	0	-1	0	0	0	-1
15	1	0	0	0	0	0	0	0	0	0	0	1
16	2	-1	0	-1	-1	1	2	-1	0	0	0	1
17	1	0	0	-1	0	0	0	-1	0	0	0	-1
18	1	0	0	-1	0	0	0	1	0	0	0	1
19	-1	0	0	-1	0	0	-1	-1	1	0	0	-3
20	1	-1	0	0	0	1	-3	-1	0	0	0	-3
21	0	0	0	0	-1	0	2	-1	0	0	0	0
22	2	0	0	-1	0	0	-1	0	0	0	0	0
ALL VA	12	-3	1	-19	-4	6	4	-12	7	0	1	-7

Table A-2. INTENSITY DATA: SOPPs by VISN: FY 1995, FY 2001, and FY1995-2001 change.

VISN	FY 1995			FY 2001			% Change: FY 1995-2001		
	SOPPs WORKLOAD			SOPPs WORKLOAD			SOPPs WORKLOAD		
	Veterans	Visits	Vis/Vet	Veterans	Visits	Vis/Vet*	Veterans	Visits	Vis/Vet
1	2,983	32,579	10.92	4,125	44,885	10.88	38.3%	37.8%	-0.4%
2	570	7,083	12.43	1,003	10,532	10.50	76.0%	48.7%	-15.5%
3	1,142	17,745	15.54	2,613	36,252	13.87	128.8%	104.3%	-10.7%
4	2,125	22,253	10.47	2,469	20,621	8.35	16.2%	-7.3%	-20.2%
5	758	10,866	14.34	1,819	19,273	10.60	140.0%	77.4%	-26.1%
6	1,600	15,951	9.97	2,458	16,939	6.89	53.6%	6.2%	-30.9%
7	1,231	12,687	10.31	3,130	29,964	9.57	154.3%	136.2%	-7.1%
8	1,835	16,984	9.26	2,955	20,475	6.93	61.0%	20.6%	-25.1%
9	1,163	5,307	4.56	1,952	13,949	7.15	67.8%	162.8%	56.6%
10	531	2,652	4.99	2,961	27,795	9.39	457.6%	948.1%	88.0%
11	1,480	10,818	7.31	1,776	14,833	8.35	20.0%	37.1%	14.3%
12	679	7,733	11.39	904	11,597	12.83	33.1%	50.0%	12.6%
13	1,320	14,624	11.08	1,409	15,186	10.78	6.7%	3.8%	-2.7%
14	1,021	12,018	11.77	1,206	10,620	8.81	18.1%	-11.6%	-25.2%
15	1,332	17,460	13.11	2,617	28,898	11.04	96.5%	65.5%	-15.8%
16	3,826	36,276	9.48	6,259	63,978	10.22	63.6%	76.4%	7.8%
17	1,231	15,789	12.83	2,516	26,122	10.38	104.4%	65.4%	-19.1%
18	1,815	18,648	10.27	3,451	30,282	8.77	90.1%	62.4%	-14.6%
19	1,062	10,339	9.74	1,897	14,247	7.51	78.6%	37.8%	-22.9%
20	1,545	20,290	13.13	4,869	48,925	10.05	215.1%	141.1%	-23.5%
21	1,197	14,456	12.08	2,880	29,561	10.26	140.6%	104.5%	-15.0%
22	917	11,315	12.34	2,747	28,216	10.27	199.6%	149.4%	-16.8%
ALL VA	31,074	333,873	10.74	57,783	563,150	9.75	86.0%	68.7%	-9.3%
AVERAGE	1,426	15,176	10.79	2,637	25,598	9.70	102.7%	105.3%	-5.1%
SD	752	7,747	2.60	1,229	13,288	1.74	95.9%	190.5%	27.7%
CV	0.53	0.51	0.24	0.47	0.52	0.18	0.93	1.81	-5.44

Table A3. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD, by VISN: FY 1995, FY 2001, and FY 1995-2001 change, Annual VA Census.

VISN	FY 1995								FY 2001								% Change: FY 1995-2001							
	<u>Inpatient PTSD Treatment</u>				<u>Domiciliary and PRRP Treatment†</u>				<u>Inpatient PTSD Treatment</u>				<u>Domiciliary and PRRP Treatment</u>				<u>Inpatient PTSD Treatment</u>				<u>Domiciliary and PRRP Treatment</u>			
	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS
1	796	66	8.3%	47.1	82	2	2.4%	95.5	265	33	12.5%	17.7	231	9	3.9%	48.2	-66.7%	-50.0%	50.0%	-62.5%	181.7%	350.0%	59.7%	-49.5%
2	311	16	5.1%	13.3	324	1	0.3%	282.0	92	4	4.3%	8.8	303	11	3.6%	20.9	-70.4%	-75.0%	-14.7%	-34.2%	-6.5%	1000.0%	1076.2%	-92.6%
3	857	47	5.5%	47.2	173	2	1.2%	149.0	233	9	3.9%	10.0	355	39	11.0%	60.7	-72.8%	-80.9%	-29.8%	-78.8%	105.2%	1850.0%	850.3%	-59.2%
4	582	78	13.4%	27.5	170	0	0.0%	0.0	190	4	2.1%	10.8	407	43	10.6%	46.8	-67.4%	-94.9%	-84.3%	-60.9%	139.4%			
5	287	9	3.1%	27.1	284	51	18.0%	118.8	168	4	2.4%	12.5	358	46	12.8%	116.7	-41.5%	-55.6%	-23.2%	-53.9%	26.1%	-9.8%	-28.4%	-1.8%
6	412	28	6.8%	29.6	254	7	2.8%	64.6	307	47	15.3%	9.3	209	0	0.0%	NA	-25.5%	67.9%	125.1%	-68.6%	-17.7%	-100.0%	-100.0%	-100.0%
7	794	156	19.6%	19.0	229	7	3.1%	203.9	241	19	7.9%	26.7	132	20	15.2%	13.4	-69.6%	-87.8%	-59.8%	40.4%	-42.4%	185.7%	395.7%	-93.4%
8	380	54	14.2%	35.4	141	1	0.7%	365.0	108	6	5.6%	7.0	212	36	17.0%	52.7	-71.6%	-88.9%	-60.9%	-80.2%	50.4%	3500.0%	2294.3%	-85.6%
9	334	12	3.6%	15.0	443	4	0.9%	215.0	208	7	3.4%	5.3	321	4	1.2%	141.5	-37.7%	-41.7%	-6.5%	-64.8%	-27.5%	0.0%	38.0%	-34.2%
10	301	19	6.3%	23.5	415	22	5.3%	44.8	150	6	4.0%	15.3	314	16	5.1%	28.5	-50.2%	-68.4%	-36.5%	-34.8%	-24.3%	-27.3%	-3.9%	-36.4%
11	779	47	6.0%	22.0					254	5	2.0%	12.4	129	28	21.7%	21.0	-67.4%	-89.4%	-67.2%	-43.6%				
12	606	44	7.3%	36.0	412	15	3.6%	156.1	218	8	3.7%	11.0	600	42	7.0%	49.9	-64.0%	-81.8%	-49.7%	-69.4%	45.6%	180.0%	92.3%	-68.1%
13	224	11	4.9%	57.2	229	3	1.3%	65.3	45	0	0.0%	NA	258	12	4.7%	40.8	-79.9%	-100.0%	-100.0%	-100.0%	12.7%	300.0%	255.0%	-37.6%
14	166	15	9.0%	16.4	89	21	23.6%	67.9	38	1	2.6%	20.0	76	8	10.5%	43.8	-77.1%	-93.3%	-70.8%	22.0%	-14.6%	-61.9%	-55.4%	-35.5%
15	371	47	12.7%	49.3	181	0	0.0%		191	37	19.4%	29.9	237	12	5.1%	55.4	-48.5%	-21.3%	52.5%	-39.4%	30.9%			
16	487	43	8.8%	15.1	243	12	4.9%	112.6	279	15	5.4%	36.3	235	43	18.3%	28.2	-42.7%	-65.1%	-38.9%	140.2%	-3.3%	258.3%	270.5%	-75.0%
17	183	17	9.3%	14.2	677	17	2.5%	102.1	241	12	5.0%	36.2	679	32	4.7%	70.0	31.7%	-29.4%	-46.5%	154.7%	0.3%	88.2%	87.7%	-31.4%
18	164	36	22.0%	20.8	125	2	1.6%	199.0	66	0	0.0%	NA	132	1	0.8%	115.0	-59.8%	-100.0%	-100.0%	-100.0%	5.6%	-50.0%	-52.7%	-42.2%
19	252	44	17.5%	48.3					116	17	14.7%	13.9	23	4	17.4%	29.8	-54.0%	-61.4%	-16.3%	-71.3%				
20	182	55	30.2%	21.3	908	29	3.2%	228.7	126	30	23.8%	16.1	703	46	6.5%	124.5	-30.8%	-45.5%	-21.2%	-24.4%	-22.6%	58.6%	104.9%	-45.6%
21	243	91	37.4%	88.7	45	0	0.0%		109	5	4.6%	12.0	150	36	24.0%	43.0	-55.1%	-94.5%	-87.7%	-86.5%	233.3%			
22	347	30	8.6%	27.2	208	18	8.7%	94.3	172	7	4.1%	42.6	240	9	3.8%	124.6	-50.4%	-76.7%	-52.7%	56.5%	15.4%	-50.0%	-56.7%	32.1%
ALL VA	9,058	965	10.7%	35.1	5,632	214	3.8%	124.8	3,817	276	7.2%	19.01	6304	497	7.9%	60.1	-57.9%	-71.4%	-32.4%	-45.8%	11.9%	132.2%	107.5%	-51.8%
AVERAGE	412	44	11.8%	32.0	282	11	4.2%	128.2	174	13	6.7%	16.1	287	23	9.3%	58.0	-53.2%	-65.2%	-33.6%	-30.0%	34.4%	439.5%	307.5%	-50.3%
S.D.	220	33	8.6%	18.0	204	13	6.0%	95.0	76	13	6.2%	11.3	176	16	6.9%	39.5	23.7%	36.7%	52.4%	69.1%	72.5%	899.9%	588.3%	33.2%
C.V.	0.53	0.74	0.73	0.56	0.73	1.18	1.42	0.74	0.44	1.01	0.94	0.70	0.61	0.71	0.74	0.68	-0.44	-0.56	-1.56	-2.30	2.11	2.05	1.91	-0.66

† Only includes domiciliary beds.

Table A4. Patients treated for PTSD in general psychiatry inpatient beds and domiciliary and PRRP beds by VISN: FY 1995, FY 2001, and FY 1995-2001 change.

	General Psychiatry Inpatient Care												Domiciliary and PRRP Care											
	FY 1995				FY 2001				Change				FY 1995†				FY 2001				Change			
	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year
1	1,299	906	25.7	37.2	709	532	14.8	19.7	-45.4%	-41.3%	-42.6%	-47.1%	1	1	53.0	53.0	58	57	89.4	91.0	5700.0%	5600.0%	68.8%	71.7%
2	415	295	20.3	28.6	119	89	9.2	12.3	-71.3%	-69.8%	-54.6%	-56.9%	11	11	142.8	142.8	230	182	16.1	20.3	1990.9%	1554.5%	-88.7%	-85.8%
3	699	552	38.1	47.7	213	176	16.4	19.8	-69.5%	-68.1%	-57.0%	-58.4%	22	22	124.0	124.0	369	338	57.0	62.2	1577.3%	1436.4%	-54.0%	-49.8%
4	839	597	33.5	47.1	359	296	16.6	20.1	-57.2%	-50.4%	-50.6%	-57.3%	11	10	113.6	125.0	252	243	53.7	55.7	2190.9%	2330.0%	-52.8%	-55.5%
5	184	135	19.4	24.8	179	166	11.6	12.5	-2.7%	23.0%	-40.4%	-49.8%	145	139	117.9	123.0	127	127	113.9	113.9	-12.4%	-8.6%	-3.4%	-7.4%
6	1,179	691	13.9	24.3	1028	715	16.0	22.9	-12.8%	3.5%	14.8%	-5.6%	34	30	88.2	100.0	16	16	31.4	31.4	-52.9%	-46.7%	-64.4%	-68.6%
7	2,031	1,404	31.5	45.5	646	485	12.3	16.3	-68.2%	-65.5%	-61.1%	-64.1%	19	17	114.4	127.9	163	148	34.9	38.5	757.9%	770.6%	-69.5%	-69.9%
8	776	589	27.4	36.7	356	284	6.0	7.6	-54.1%	-51.8%	-78.0%	-79.4%	4	4	90.0	90.0	176	171	64.8	66.7	4300.0%	4175.0%	-28.0%	-25.8%
9	460	318	13.7	18.5	351	276	10.4	13.2	-23.7%	-13.2%	-24.2%	-28.6%	14	13	173.4	186.8	6	6	244.3	244.3	-57.1%	-53.8%	40.9%	30.8%
10	321	251	22.0	28.8	196	162	9.6	11.6	-38.9%	-35.5%	-56.5%	-59.8%	93	91	70.8	72.4	149	142	60.1	63.1	60.2%	56.0%	-15.1%	-12.8%
11	684	490	25.1	35.1	178	144	11.0	13.6	-74.0%	-70.6%	-56.2%	-61.3%					356	278	24.1	30.9				
12	591	416	32.9	46.2	246	199	16.2	20.1	-58.4%	-52.2%	-50.7%	-56.6%	13	12	146.2	158.4	369	339	43.4	47.3	2738.5%	2725.0%	-70.3%	-70.2%
13	264	188	20.7	28.5	72	64	5.7	6.4	-72.7%	-66.0%	-72.5%	-77.5%	34	32	103.1	109.6	55	52	70.7	74.8	61.8%	62.5%	-31.5%	-31.8%
14	177	129	22.1	32.4	35	29	6.2	7.5	-80.2%	-77.5%	-71.8%	-76.8%	112	110	81.4	82.9	72	59	38.9	47.5	-35.7%	-46.4%	-52.2%	-42.7%
15	746	493	30.8	46.0	483	356	25.8	35.1	-35.3%	-27.8%	-16.1%	-23.8%	3	3	268.7	268.7	28	25	81.1	90.8	833.3%	733.3%	-69.8%	-66.2%
16	891	704	22.8	28.6	264	237	11.4	12.7	-70.4%	-66.3%	-50.2%	-55.8%	31	31	104.6	104.6	399	390	33.0	33.8	1187.1%	1158.1%	-68.4%	-67.7%
17	587	403	15.1	22.7	478	379	17.2	21.7	-18.6%	-6.0%	14.0%	-4.3%	38	36	143.1	151.0	79	60	76.6	100.9	107.9%	66.7%	-46.5%	-33.2%
18	380	299	24.9	34.5	161	143	7.3	8.2	-57.6%	-52.2%	-70.8%	-76.2%	4	4	70.0	70.0	2	2	26.5	26.5	-50.0%	-50.0%	-62.1%	-62.1%
19	513	367	38.3	52.4	387	319	8.2	9.9	-24.6%	-13.1%	-78.6%	-81.0%					46	46	42.0	42.0				
20	856	669	24.0	31.8	805	687	13.3	15.6	-6.0%	2.7%	-44.6%	-51.0%	55	51	157.9	170.2	245	224	63.3	69.2	345.5%	339.2%	-59.9%	-59.3%
21	599	482	53.0	63.5	166	142	9.8	11.4	-72.3%	-70.5%	-81.5%	-82.0%	0	0	0.0		292	277	56.9	59.9				
22	358	288	25.0	30.7	166	144	8.0	9.2	-53.6%	-50.0%	-68.0%	-69.9%	71	71	141.3	141.3	91	89	182.5	186.6	28.2%	25.4%	29.2%	32.1%
All VA	14,849	10,666	27.2	37.8	7597	5949	13.6	17.4	-48.8%	-44.2%	-50.0%	-54.1%	715	682	112.2	117.7	3,580	3,222	52.9	58.8	400.7%	372.4%	-52.8%	-50.0%
AVG.	675	485	26.4	36.0	345	274	11.9	14.9	-48.5%	-41.8%	-49.9%	-55.6%	36	34	115.2	120.1	163	149	68.4	72.6	1140.6%	1096.2%	-36.7%	-35.5%
S.D.	412	280	8.9	10.9	250	184	4.7	6.6	23.8%	28.6%	26.0%	21.9%	39	38	52.9	54.4	128.4	117.3	52.1	52.0	1586.8%	1554.4%	41.7%	40.9%
C.V.	0.61	0.58	0.34	0.30	0.72	0.67	0.39	0.44	-0.49	-0.69	-0.52	-0.39	1.10	1.11	0.46	0.45	0.79	0.79	0.76	0.72	1.39	1.42	-1.14	-1.15

† Only includes domiciliary beds.

Table A5. Percent treated for PTSD by VISN: FY 1995, FY 2001, and FY 1995-2001 change.

VISN	Inpatient General Psychiatry						Domiciliary and PRRP					
	FY 1995		FY 2001		% Change: FY 1995-2001		FY 1995†		FY 2001		% Change: FY 1995-2001	
	Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD	
	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans
1	18.1%	20.3%	13.6%	15.5%	-24.8%	-23.8%	0.5%	0.5%	9.4%	11.0%	1682.4%	1909.8%
2	13.7%	15.9%	5.2%	5.8%	-61.9%	-63.8%	2.4%	2.6%	14.1%	14.2%	495.4%	447.2%
3	10.9%	13.8%	5.2%	6.6%	-52.0%	-52.1%	5.2%	5.4%	18.4%	19.7%	254.0%	268.0%
4	13.1%	16.4%	8.9%	10.2%	-32.3%	-37.6%	1.8%	1.6%	8.2%	8.7%	366.4%	439.3%
5	6.5%	7.6%	5.6%	8.1%	-14.2%	6.5%	35.5%	35.1%	12.3%	13.2%	-65.4%	-62.5%
6	16.4%	16.3%	15.4%	16.4%	-6.1%	0.7%	4.2%	4.1%	0.9%	1.0%	-77.8%	-74.8%
7	24.1%	26.7%	13.2%	14.0%	-45.2%	-47.5%	4.3%	4.2%	23.5%	23.1%	450.1%	454.1%
8	9.7%	11.1%	5.9%	6.8%	-39.1%	-38.3%	1.2%	1.3%	15.6%	16.5%	1205.2%	1208.1%
9	8.8%	9.1%	7.1%	7.8%	-19.5%	-14.0%	2.0%	2.1%	0.6%	0.7%	-68.4%	-67.0%
10	8.4%	10.1%	5.6%	6.6%	-33.2%	-34.5%	6.0%	6.4%	5.3%	5.7%	-12.0%	-10.8%
11	12.1%	13.3%	4.3%	4.9%	-64.4%	-63.0%			34.5%	31.5%		
12	10.6%	12.6%	6.0%	7.6%	-43.3%	-39.9%	1.9%	1.9%	13.5%	14.1%	594.4%	657.3%
13	8.5%	9.2%	3.3%	4.3%	-61.6%	-53.1%	6.8%	6.8%	3.7%	3.7%	-46.6%	-44.5%
14	7.6%	8.6%	3.4%	3.8%	-55.4%	-56.0%	32.0%	32.3%	9.4%	9.3%	-70.7%	-71.2%
15	12.6%	13.6%	9.6%	10.7%	-24.1%	-21.7%	1.0%	1.1%	3.3%	3.6%	220.5%	239.8%
16	11.8%	13.2%	3.6%	4.5%	-69.7%	-66.3%	3.9%	4.1%	23.7%	24.8%	508.8%	511.0%
17	11.1%	12.7%	10.6%	12.7%	-4.7%	-0.1%	3.7%	4.0%	3.7%	3.8%	0.6%	-4.0%
18	10.1%	12.3%	5.8%	7.2%	-42.5%	-41.2%	0.8%	1.0%	0.3%	0.3%	-63.7%	-66.5%
19	19.6%	22.4%	15.6%	18.1%	-20.3%	-19.2%			27.7%	29.5%		
20	21.0%	24.8%	21.4%	24.8%	2.1%	0.0%	4.1%	4.2%	10.4%	10.5%	155.0%	152.1%
21	14.1%	18.5%	5.1%	6.7%	-63.6%	-63.8%	0.0%	0.0%	30.0%	32.0%		
22	5.8%	7.6%	4.1%	5.1%	-28.9%	-32.6%	9.4%	9.5%	10.6%	10.6%	12.7%	12.0%
All VA	12.9%	14.8%	8.5%	10.0%	-34.2%	-32.5%	5.8%	6.0%	11.4%	11.9%	97.2%	98.9%
Avg.	12.5%	14.4%	8.1%	9.5%	-36.5%	-34.5%	6.0%	6.1%	12.7%	13.1%	281.9%	299.8%
S.D.	4.7%	5.3%	4.8%	5.3%	20.3%	22.0%	9.3%	9.3%	9.7%	9.7%	450.6%	489.4%
C.V.	0.37	0.37	0.59	0.56	-0.56	-0.64	1.54	1.52	0.77	0.75	1.60	1.63

† Only includes domiciliary beds.

APPENDIX B

Summary of Special Emphasis Program Goals

This Appendix recapitulates the goals for special emphasis programs for PTSD as presented in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*. We have modified Population Measures 1 - 3 and Program Measure 2 and added Population Measure 6 with the approval of the Clinical Quality Improvement Specialist, Office of Performance and Quality, VA Headquarters. Population Measures 4 and 5 and Program Measures 1 and 3 remain unchanged. Population Measures 1, 2, 3 and 6 specify outcome goals for PTSD, substance abuse, work and violence. We have introduced technical modifications to the meeting of these goals so that the methods used are consistent with the methods used elsewhere in the National Mental Health Program Performance Monitoring System (Rosenheck & DiLella, 1998; Kaspro et al., 1997; Seibyl et al., 1997).

Population Measure 1 as modified is:

Change in PTSD symptoms on the short form of the Mississippi Scale from admission to follow-up 4 months after discharge.

Goal: Program not significantly worse than the median program.

Our experience in monitoring outcomes suggests that alcohol abuse and drug abuse should be considered separately. Outcomes for the two are not related highly to each other, despite them both being forms of substance abuse; combining them masks some differences among programs. Therefore, **Population Measure 2** is modified by splitting it into two Measures, as follows:

Change in alcohol abuse symptoms as measured by the Alcohol Abuse Composite of the Addiction Severity Index from admission to follow-up 4 months after discharge.

Goal: Program not significantly worse than the median program.

Change in drug abuse symptoms as measured by the Drug Abuse Composite of the Addiction Severity Index from admission to follow-up 4 months after discharge.

Goal: Program not significantly worse than the median program.

Population Measure 3 as modified is:

Change in occupational functioning as measured by the number of days employed or the number of dollars earned from work during the past 30 days from admission to follow-up 4 months after discharge.

Goal: Program not significantly worse than the median program.

Population Measure 4, unmodified, is:

Proportion of veterans in need of PTSD care treated for PTSD in VA outpatient mental health clinics in each year.

Goal: Fifty-five percent.

Population Measure 5, unmodified, is:

Proportion of veterans who receive a psychiatric outpatient visit within 30 days of discharge from an inpatient program.

Goal: Greater than 51%.

Population Measure 6, newly added, is:

Change in violence as measured by the Violence Scale as modified from the National Vietnam Veterans Readjustment Study from admission to follow-up 4 months after discharge.

Goal: Program not significantly worse than the median program.

Program Measure 1, unmodified, is:

Proportion of veterans successfully contacted for outcome assessment after discharge from an inpatient PTSD program.

Goal: 50%.

Program Measure 2 has been changed from “Number of patients seen...” to “Number of patients treated...” It is possible for programs to screen a large number of veterans with one contact each, without providing meaningful treatment in the process. The criterion for treatment to consist of more than one contact provides a lenient definition of treatment and, at the same time, eliminates the potential reward for focusing on performing a large number of screening contacts with limited benefit to the veterans involved. Program Measure 2 now is:

Number of patients treated (that is, seen more than once) per filled FTEE in the outpatient PTSD program (including facility contributed FTEE).

Goal: 75 patients/filled FTEE.

Program Measure 3, unmodified, is:

Number of hospital days for patients in the 6 months after discharge from an inpatient PTSD program.

Goal: Less than 13.5 days.

Appendix C

Specialized PTSD Programs Annual Report: Calculation of FILLED FTEE and DIRECT COST

Calculation of **FILLED FTEE** and **DIRECT COST**

Appendix C is a description of the procedure for calculating **FILLED FTEE** (tables 3-1, 3-2, 3-5, 3-6, 3-7, and 3-8) and **DIRECT COST** (Part I, tables 4 and 5; tables 3-9, 3-10, 3-11, 3-12) for Specialized PTSD Programs.

Filled FTEE and Direct Cost are calculated from data supplied from the *Specialized PTSD Programs Annual Report*. These data include the following items from Parts 2 and 5 on the Annual Report form: Part 2 - "Total Recurring All Other Funds Expended up to \$9999.00"; Part 5, item c - "Start and End Dates", which are used to determine time worked for the VA facility; Part 5, item d - "Number of Hours Worked Per Pay Period for the Facility"; Part 5, item e - "Actual Salary Plus Benefits Paid for Work at the Facility for this Fiscal Year"; Part 5, item f, "Start and End Dates", which are used to determine time worked for the program; and Part 5, item g - "Total Number of Hours Committed Per Week to the Program".

Steps for calculating **FILLED FTEE**:

1. Using the program Start Date and End Date (item "f", for *each* of the completed sections numbered 1-48, Part 5 of the Annual Report) determine the total number of days worked during the fiscal year for the program. Divide the total number of days by 364 to determine the ***Portion of the Fiscal Year Worked for the Program***.
2. Divide the Number of Hours Committed Per Week to the Program (item "g", for *each* of the completed sections numbered 1-48, in Part 5 of the Annual Report) by 40 to determine the ***Portion of A Full FTEE Worked for the Program During The Fiscal Year***.
3. Multiply the Portion of the Fiscal Year Worked for the Program by the Portion of A Full FTEE Worked for the Program During The Fiscal Year to determine the ***Filled Program FTEE*** for each individual staff member.
4. For Specialized Outpatient PTSD Programs, sum the Filled Program FTEE for each staff member within a program to determine the total ***FILLED FTEE***, for each program (tables 3-1, 3-2, 3-5 and 3-6).
4. For Specialized Intensive PTSD Programs, sum the Filled Program FTEE for each staff member across programs at a facility to determine the total ***FILLED FTEE***, for each facility (tables 3-3, 3-4, 3-7 and 3-8).

Steps for calculating ***DIRECT COST***:

1. Using the facility Start Date and End Date (item "c", for *each* of the completed sections numbered 1-48, Part 5 of the Annual Report) determine the total number of days worked during the fiscal year for the facility. Divide the total number of days by 364 to determine the ***Portion of the Fiscal Year Worked for the Facility***.
2. Divide the Number of Hours Worked Per Pay Period for the Facility (item "d", for *each* of the completed sections numbered 1-48, Part 5 of the Annual Report) by 80 to determine the ***Portion of A Full FTEE Worked for the Facility During the Fiscal Year***.
3. Multiply the Portion of the Fiscal Year Worked for the Facility by the Portion of A Full FTEE Worked for the Facility During The Fiscal Year to determine the ***Filled Facility FTEE*** for each individual staff member.
4. Multiply the Actual Salary Plus Benefits Paid by the factor $[1/\text{Filled Facility FTEE}]$ to determine the ***Full-time Equivalent Salary & Benefits for working at the facility*** for each individual staff member.
5. Multiply the Full-time Equivalent Salary & Benefits by the Filled Program FTEE to determine ***Actual Salary & Benefits for the Program*** for each individual staff member.
6. For Specialized Outpatient PTSD Programs, sum the Actual Salary & Benefits for the Program for each staff member reported in the Annual Report and the Total Recurring All Other Funds to determine Total Program Dollars or ***DIRECT COST***, by program (tables 3-9 and 3-10).
7. For Specialized Intensive PTSD Programs, sum the Actual Salary & Benefits for the Program for each staff member reported in the Annual Report and the Total Recurring All Other Funds to determine Total Program Dollars, for each program. Then sum the Total Program Dollars for each program at a facility to determine the ***DIRECT COST***, for the facility (tables 3-11 and 3-12).

Appendix D

Programs with Inadequate Data

Table D-1. Unadjusted Means for Stations with Inadequate Data

[illegible]

APPENDIX E

Outpatient Treatment of PTSD Outside of Specialized Programs

Outpatient Treatment of PTSD Outside of Specialized Programs

Appendix E presents information regarding differentiation of treatment in different types of settings in VA, as specified in VHA Directive 2000-004, “Definition of Levels of Specialization in Post-Traumatic Stress Disorder (PTSD) Services”. This directive delineates the types of outpatient PTSD services available in VA, both in and outside of specialized programs.

Table E1 presents the total number of veterans receiving outpatient PTSD treatment in the VA system broken out by whether they received treatment in a specialized outpatient PTSD program (57,783), from a PTSD specialist (13,184), from a mental health program other than the above (133,741), or from a non-mental health program (12,009), by VISN, for FY 2001.

Table E2 presents the total number of veterans receiving outpatient individual and group treatment from PTSD specialists by facility, for FY 2001. Table E2 also indicates if a Specialized Outpatient PTSD Program (PCT, SUPT or WSDTT) was operating at each of those facilities during FY 2001.

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DEFINITION OF LEVELS OF SPECIALIZATION IN POST-TRAUMATIC STRESS DISORDER (PTSD) SERVICES

1. PURPOSE: This Veterans Health Administration (VHA) Directive provides working definitions to assist in clearly identifying VHA strategy in providing both specialized and general Post-traumatic Stress Disorder (PTSD) services.

2. BACKGROUND

a. Public Law 104-262, the Veterans Healthcare Eligibility Reform Act of 1996, §1706(b)(1), requires VHA to maintain its capacity to provide for the specialized treatment and rehabilitation needs of disabled veterans (including those with ... mental illness) within distinct programs or facilities...that are dedicated to the specialized needs of those veterans..."

b. The "Report to Congress on Maintaining Capacity to Provide for the Specialized Treatment and Rehabilitation Needs of Disabled Veterans," dated May 1, 1997, defines the overall group of disabled mentally ill veterans into two main groups: those diagnosed with a serious mental illness (SMI) and those diagnosed with PTSD. This Directive addresses the latter group.

c. In order to obtain a wider range of views in formulating a VHA-wide approach, on March 25, 1999, the Office of the Under Secretary appointed a Seriously and Chronically Mentally Ill (SCMI) Strategic Implementation Committee composed of four Clinical Managers, a medical center Director, a Mental Health Care Line Director, the National Director of the Northeast Program Evaluation Center (NEPEC), a representative of Vietnam Veterans Association, and a representative of the Mental Health Strategic Healthcare Group.

d. This Directive differentiates among general, specialty, and special program designation within the Mental Health service area. The Directive identifies distinctions of each and the accountability expected from a designated special program. Described here are the definitions of each and the general levels of expertise of the staff providing care in each area. To assist in clearly identifying VHA strategy in providing PTSD services, this Directive specifically applies the general principles agreed upon to PTSD services.

3. POLICY: It is VHA policy to use the definitions in subparagraph 4.a. to distinguish specialized PTSD programs from general PTSD care at all facilities and to use the appropriate Treating Specialty Codes and Decision Support System (DSS) Identifiers, as described, to record workload starting in Fiscal Year (FY) 2000.

4. ACTIONS

a. **Definitions.** The following definitions are to be used by all facilities:

THIS VHA DIRECTIVE EXPIRES FEBRUARY 28, 2005

(1) **Specialized PTSD Treatment Programs.** To qualify as a Specialized PTSD Treatment Program, the program must:

(a) Have a designated program leader who has the responsibility and authority to lead and manage the team as well as to provide clinical evaluations of care.

(b) Be composed of providers (more than a single provider) in one location who are experts in the care of PTSD, with their expertise acquired through education, training, and supervision of care. These providers form a team whose team members spend the preponderance of their time caring for veterans with PTSD needing specialized services. To ensure that a veteran who is enrolled in the special program has continuous access to a team provider, the team must be of sufficient size to cover for staff absences.

NOTE: Specialized PTSD Programs may have, in addition, team members who are at remote access points and/or facilities. These members should be maintaining an active consultative relationship with the core team members, sharing in the discussion of patients and continuing education activities.

(c) Be visibly identified by patients as a program. To enable this identification, the core team members should be located in close proximity to each other.

(d) Participate in the mandated national program evaluation for specialized PTSD treatment programs.

(e) Enter data into designated bed section codes and clinics with special DSS identifiers. These include:

1. Patient Treatment File (PTF) Treating Specialty Codes 26, 38, 79, 88 and 91; and
2. The following DSS Identifiers:
 - a. 519 (Substance Use Disorder and/or PTSD teams),
 - b. 525 (Women's Stress Disorder Teams),
 - c. 540 (PCT Post-traumatic Stress, Individual),
 - d. 561 (PCT-Post-traumatic Stress, Group),
 - e. 580 (PTSD Day Hospital), and
 - f. 581 (PTSD Day Treatment).

NOTE: For Specialized PTSD inpatient programs that include a significant outpatient clinical team (e.g., over one Full-time Employee Equivalent (FTEE)), the outpatient component should

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use DSS Identifiers for PCTs (540 and 561) to record outpatient visits. In addition, the outpatient component needs to participate in the national program evaluation for specialized PTSD treatment programs as a PCT.

(2) Specialty PTSD Care Outside of a Specialized Program. Specialty PTSD care outside of a specialized program is identified by:

(a) A provider recognized as a specialist, through designation in the provider's clinical privileges, scope of practice statement, or core competencies as set forth in the medical staff by-laws and/or general personnel practices, or through specific designation as a specialist by the care line director or service chief. The provider is required to demonstrate annual continuing education activities in the diagnosis and treatment of PTSD.

(b) The provider maintaining accepted levels of expertise for the specialty care of patients with PTSD. **NOTE:** *The usual review established by the medical staff bylaws and facility will be utilized to certify continued practice. The clinician must see an adequate number of cases to maintain expertise; the adequate number of cases to be determined by the care line director or service chief.*

(c) PTSD specialists, not associated with a specialized PTSD treatment program, entering outpatient workload into clinics with the following DSS identifiers:

1. 516 (PTSD, Group),
2. 562 (PTSD, Individual),
3. 524 (Active Duty Sex Trauma), and
4. 589 (Non-active Duty Sex Trauma).

(3) General Mental Health Care. General Mental Health Care is defined as:

(a) Care provided by Mental Health practitioners who are not specially, or extensively, trained in PTSD treatment or whose focus of care is generalized. These clinicians:

1. Provide routine screening and treatment to patients with PTSD in milder forms and/or who have other co-existing mental illness.
2. Identify care provided for PTSD by recording PTSD as the diagnosis on the encounter form.
3. Utilize PTSD specialty consultation or referral for exacerbation of PTSD symptoms not resolved with general interventions or where clinically indicated.

(b) Care by non-Mental Health practitioners. These clinicians:

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1. Provide care for PTSD and its symptomatic manifestations as part of general or primary care practice.

2. Identify care provided for PTSD by recording PTSD as the diagnosis on the encounter form.

3. Utilize PTSD specialty consultation or referral for exacerbation of PTSD symptoms not resolved with general interventions or where clinically indicated.

b. **Responsibilities.** Responsibilities are defined as follows:

(1) **Facility or Care Line Actions.** The facility Director, or designee, is responsible for:

(a) Identifying and reviewing specialist skills, through designation in the specialist's clinical privileges, scope of practice statement or core competencies as set forth in the medical staff bylaws and/or general personnel practices, or through specific designation by their care line director or service chief as a specialist, required to demonstrate annual continuing education activities in the diagnosis and treatment for PTSD. *NOTE: This designation must meet usual standards of practice and review criteria.*

(b) Using National DSS identifiers and bed section conventions to designate specialized PTSD programs and specialty PTSD care.

(c) Providing complete nationally-adopted monitoring information for specialized programs in a timely manner.

(2) **Monitoring by NEPEC.** The NEPEC is responsible for:

(a) Producing periodic reports on the structure, process, and outcome of PTSD services.

(b) Providing population-based data on the availability and access to specialized PTSD Programs, PTSD Specialty Care, and PTSD general care.

1. The population estimates for assessment of the availability and access to specialized PTSD programs will be calculated as follows:

a. **Numerators.** Numerators are the number of unique veterans in specialized PTSD programs (any designated PTSD specialized program) weighted for intensity of such services.

b. **Denominators.** Denominators are the number of veterans in the network who are service-connected for PTSD.

2. Reports will be generated that characterize access to PTSD specialty care, and where data is available, contract services for PTSD.

(3) **Veterans Integrated Services Network (VISN) Actions.** The VISN Director, or designee, is responsible for:

- (a) Providing PTSD services based on an assessment of population-based need.
- (b) Establishing strategies to provide Network enrollees access to PTSD specialized programs.

NOTE: If access to specialized PTSD programs is to be provided outside the geographic VISN boundaries or contractually, a written plan and formal contract relationship is to be developed and reviewed by the VHA Mental Health Strategic Healthcare Group.

- 5. **REFERENCES:** VHA Program Guide 1103.3, June 3, 1999, pages 26-30, 61-65.
- 6. **FOLLOW-UP RESPONSIBILITY:** The Chief Consultant, Mental Health Strategic Healthcare Group (116) is responsible for the contents of this Directive.
- 7. **RESCISSION:** None. This VHA Directive expires February 28, 2005.

S/ Melinda Murphy for
Thomas L. Garthwaite, M.D.
Deputy Under Secretary for Health

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Table E1. VA PTSD Outpatient Treatment by Specialized Programs, Specialists, Mental Health and Non-Mental Health Stops, by VISN, FY 2001

VISN	SOPPs 519, 525, 540 & 561 UNIQUE #VETS	Specialists 516 & 562 UNIQUE #VETS	Mental Health Non-Specialized Stops UNIQUE #VETS	NonMental Health Stops UNIQUE #VETS
1	4,125	419	6,808	2,615
2	1,003	608	3,297	881
3	2,613	615	4,560	1,720
4	2,469	889	6,094	1,737
5	1,819	68	2,530	816
6	2,458	296	5,437	2,067
7	3,130	2507	6,323	2,522
8	2,955	943	7,795	2,437
9	1,952	299	5,307	1,441
10	2,961	255	2,561	915
11	1,776	473	2,223	1,054
12	904	1293	2,742	1,340
13	1,409	325	2,101	559
14	1,206	114	602	330
15	2,617	171	3,605	1,117
16	6,259	1904	7,222	3,067
17	2,516	291	4,487	1,840
18	3,451	264	4,242	1,950
19	1,897	212	3,764	1,295
20	4,869	485	6,328	2,332
21	2,880	223	6,076	2,028
22	2,747	588	4,764	1,777
SUM	58,016	13,242	98,868	35,840
All VA	57,783	13,184	97,541	35,362

Table E2. VA PTSD Outpatient Treatment by Specialists, by Facility, FY 2001.

VISN	STA. CODE	FACILITY**		Stop 516 (Group)		Stop 562 (Individual)		TOTAL VISITS	Type of Specialized PTSD Program in Operation
				VISITS	UNIQUE #VETS	VISITS	UNIQUE #VETS		
1	402	Togus	ME	0	0	170	19	170	PCT, WSDTT
1	518	Bedford	MA	853	66	0	0	853	
1	523	Boston HCS/Boston	MA	140	47	3	1	143	
1	523BZ	Boston HCS/Boston (OPC)	MA	1480	142	973	208	2453	
1	689	CT: West Haven	CT	109	7	558	279	667	
1	608	Manchester	NH	324	22	27	4	351	
1	631	Northampton	MA	571	38	97	82	668	
1	650	Providence	RI	272	11	0	0	272	PCT
2	528	Upstate NY HCS	NY	865	66	18	17	883	PCT
2	528A4	Western NY HCS/Batavia	NY	2437	192	932	191	3369	
2	528A6	HCS Upstate NY V2 Bath	NY	777	150	116	109	893	
2	528A7	VA Healthcare NY V2	NY	330	41	20	19	350	
2	528A8	HCS Upstate NY V2 Albany	NY	1252	75	1744	250	2996	
3	526	Bronx	NY	0	0	533	187	533	PCT
3	561	East Orange	NJ	0	0	23	19	23	PCT
3	561A4	Lyons	NJ	12	6	185	177	197	PCT
3	561BZ	Brick	NJ	2147	88	0	0	2147	
3	620	Montrose	NY	7147	297	1622	190	8769	
3	620GA	New City (Rockland) CBOC	NY	667	28	0	0	667	
3	630A4	Brooklyn DIV	NY	1315	80	0	0	1315	
3	632	Northport	NY	1317	68	275	90	1592	
4	503	James Van Zandt	PA	1213	56	0	0	1213	PCT
4	529	Butler	PA	580	30	0	0	580	
4	540	Clarksburg	WV	1227	99	967	271	2194	
4	542	Coatesville	PA	0	0	42	38	42	
4	542GA	Springfield (CBC)	PA	549	103	0	0	549	
4	595	Lebanon	PA	1492	269	0	0	1492	
4	642	Philadelphia (OLD)	PA	873	63	233	214	1106	
4	642GA	Fort Dix (CBC)	PA	0	0	414	37	414	PCT
5	512	MD HCS/Baltimore	MD	85	38	177	90	262	PCT
5	512A5	Perry Point	MD	0	0	90	21	90	PCT
6	637	Asheville	NC	2669	129	138	36	2807	PCT
6	658	Salem	VA	1484	121	192	62	1676	PCT
7	509A0	Augusta/Lenwood	GA	4306	294	3705	798	8011	
7	521GA	Huntsville CBOC	AL	473	44	0	0	473	
7	521GB	Decatur CBOC	AL	331	33	0	0	331	
7	521GC	Florence CBOC	AL	642	28	0	0	642	
7	521GD	Gadsden CBOC	AL	648	38	0	0	648	
7	521GE	Anniston CBOC	AL	409	36	0	0	409	
7	544	Columbia	SC	6511	353	3626	1014	10137	
7	544BZ	Greenville soc	SC	918	64	1108	244	2026	
7	619A4	Central AL Veterans HCS/Tuskegee	AL	1810	165	225	113	2035	
7	619GA	Columbus OPC	AL	428	26	591	171	1019	
7	679	Tuscaloosa	AL	1754	404	2469	914	4223	PCT
8	516	Bay Pines	FL	5666	392	0	0	5666	SUPT
8	546	Miami	FL	21	15	63	56	84	PCT
8	548	W Palm Beach	FL	3743	227	3323	686	7066	PCT
8	573BZ	Daytona Beach soc	FL	1485	75	0	0	1485	
8	672	San Juan	PR	68	12	0	0	68	
8	673GA	Brevard CBOC	FL	962	52	0	0	962	
9	581	Huntington	WV	811	94	0	0	811	PCT*
9	581GA	Prestonsburg	WV	586	56	0	0	586	PCT
9	596	Lexington	KY	0	0	274	107	274	
9	603	Louisville	KY	567	54	0	0	567	

VISN	STA. CODE	FACILITY**		Stop 516 (Group)		Stop 562 (Individual)		TOTAL VISITS	Type of Specialized PTSD Program in Operation
				VISITS	UNIQUE #VETS	VISITS	UNIQUE #VETS		
9	614	Memphis	TN	113	21	0	0	113	PCT
9	626	Nashville	TN	1070	58	96	35	1166	
9	626BY	Knoxville SOC	TN	60	20	0	0	60	
10	541BY	Canton soc	OH	233	44	4	4	237	
10	541BZ	Youngstown	OH	267	47	58	44	325	
10	541GB	Lorain CBOC	OH	117	10	4	4	121	
10	541GC	Sandusky CBOC	OH	72	12	44	11	116	
10	541GD	Mansfield CBOC	OH	404	41	357	106	761	
10	541GF	541GF		62	7	289	48	351	
10	541GG	Akron CBOC	OH	169	19	21	14	190	
10	541GH	East Liverpool CBOC	OH	102	18	30	10	132	
10	539	Cincinnati	OH	2	2	187	50	189	
10	757	Columbus IOC	OH	0	0	114	111	114	PCT
10	552	Dayton	OH	2836	151	1465	279	4301	PCT*
11	515	Battle Creek	MI	1756	305	14	7	1770	PCT
11	515BY	Grand Rapids soc	MI	527	41	0	0	527	
11	553	Detroit VAMC	MI	1467	107	0	0	1467	
11	583	Indianapolis-10th St.	IN	4201	210	768	184	4969	
11	610	No. Indiana HCS	IN	0	0	126	30	126	
11	610	No. Indiana HCS	IN	0	0	91	28	91	
11	655	Saginaw	MI	740	82	5	4	745	PCT*
12	537	Chicago HCS/West Side	IL	276	20	0	0	276	PCT
12	537A4	Chicago (Lakeside)	IL	366	14	0	0	366	
12	537BY	Crown Point	IN	71	8	0	0	71	
12	556	North Chicago	IL	4572	358	4699	682	9271	
12	578	Hines	IL	266	14	85	61	351	
12	585	Iron Mountain	MI	746	34	468	46	1214	
12	607	Madison	WI	189	23	19	19	208	
12	676	Tomah	WI	2592	95	1483	192	4075	
12	676GA	Wausau CBOC	WI	0	0	205	43	205	
12	676GC	Lacrosse CBOC	WI	10	3	143	38	153	
12	676HA	Eau Claire (ORC)	WI	56	12	59	18	115	
12	695	Milwaukee	WI	3146	135	1015	204	4161	
12	695BY	Appleton	WI	363	21	0	0	363	
13	437	Fargo	ND	40	7	0	0	40	
13	656	St. Cloud	MN	6254	263	354	78	6608	
13	656GA	Brainerd CBOC	MN	705	66	0	0	705	
14	636A4	VA CPHN Grand Island	NE	304	13	447	84	751	
14	636A6	VA CPHN Des Moines	IA	1143	65	239	62	1382	
15	543	Columbia	MO	204	24	0	0	204	
15	589A4	589A4	MO	230	32	0	0	230	
15	609	Marion	IL	513	72	0	0	513	
15	609BY	Evansville soc	IN	235	27	0	0	235	
15	657A0	St. Louis/Jeff Barracks	MO	504	47	0	0	504	
15	657A5	657A5	MO	175	63	0	0	175	
15	657GJ	657GJ	MO	74	25	0	0	74	
16	502	Alexandria	LA	376	49	2	2	378	
16	564	Fayetteville	AR	124	10	811	322	935	
16	564BY	Mount Vernon soc	AR	523	79	275	180	798	
16	580BZ	Lufkin	TX	25	10	0	0	25	
16	598A0	N. Little Rock	AR	376	49	3946	1181	4322	
16	623	Muskogee	OK	400	59	0	0	400	
16	623BY	Tulsa soc	OK	1150	144	0	0	1150	
16	629	New Orleans	LA	35	12	170	27	205	
16	667	Shreveport	LA	936	108	84	13	1020	

VISN	STA. CODE	FACILITY**		Stop 516 (Group)		Stop 562 (Individual)		TOTAL VISITS	Type of Specialized PTSD Program in Operation
				VISITS	UNIQUE #VETS	VISITS	UNIQUE #VETS		
17	549A4	Bonham VAMC	TX	239	31	387	107	626	
17	549BY	Fort Worth	TX	1283	101	5	3	1288	
17	671A4	Kerrville	TX	899	53	0	0	899	
17	671GB	Victoria (OCS)	TX	219	7	0	0	219	
17	674A4	Central TX Veterans HCS/Waco	TX	22	7	122	55	144	
18	501GA	Artesia (CBC)	NM	113	20	0	0	113	PCT
18	504	Amarillo HCS	TX	257	28	0	0	257	
18	504BY	Lubbock soc	TX	621	31	0	0	621	
18	756	El Paso-IOC	TX	307	16	482	201	789	
18	756GA	Las Cruces	TX	315	40	443	99	758	
18	644	Phoenix	AZ	760	85	0	0	760	PCT
18	644BG	Showlow CBOC	AZ	188	13	0	0	188	
19	436	Fort Harrison	MT	280	20	0	0	280	PCT*
19	436GH	Billings CBOC	MT	267	17	0	0	267	
19	567GA	Pueblo (CBC)	CO	1570	143	345	91	1915	
19	567GB	Colorado Springs (CBC)	CO	0	0	54	33	54	
19	660	Salt Lake City	UT	0	0	21	21	21	
19	666	Sheridan	WY	0	0	37	23	37	PCT
19	666GC	Riverton COBC	WY	111	23	0	0	111	
20	531	Boise	ID	0	0	23	17	23	PCT
20	653	Roseburg	OR	2232	137	245	43	2477	PCT
20	653BY	Eugene soc	OR	1304	142	467	91	1771	
20	653GA	Bandon	OR	525	39	0	0	525	
20	653GB	Brookings CBOC	OR	109	24	0	0	109	
20	663	Puget Sound/Seattle	WA	13	4	100	62	113	
20	668	Spokane	WA	136	10	0	0	136	PCT
20	687	Walla Walla	WA	584	63	0	0	584	
20	687GA	Richland CBOC	WA	111	20	0	0	111	
21	459GB	Hilo	HI	0	0	520	142	520	PCT
21	459GC	Kailua	HI	0	0	90	27	90	
21	570	Central California HCS	CA	414	37	0	0	414	
21	612A4	Sacramento VAMC	CA	674	117	0	0	674	
22	600	Long Beach	CA	3116	170	0	0	3116	
22	605	Loma Linda	CA	0	0	552	60	552	PCT, WSDTT
22	691	LA Wadsworth	CA	8914	649	1110	260	10024	PCT
22	691A4	Sepulveda OPC (Div)	CA	1938	107	0	0	1938	
22	691GB	Santa Barbara CBOC	CA	110	18	0	0	110	
22	593	Las Vegas	NV	1459	89	0	0	1459	PCT*
161 sites				TOTAL	134,593	10,211	48,113	182,706	
				MEAN	916	69	327	1,243	
				STD	1,454	95	772	1,974	

**Facilities with less than 20 total specialist visits are not listed.

*=A new SOPP opened at this facility in fiscal year 2001.

†Entries from Stop Codes 516 and 562 in the Austin Outpatient File comprise the data in this table.

APPENDIX F

Acronyms and Abbreviations Used in the Text

Acronyms and Abbreviations Used in the Text

ASI	Addiction Severity Index
BD	Bed Days
CDR	Cost Distribution Report
C.V.; CV	Coefficient of Variation
DC; D/C	Discharge
DD214	Dept. of Defense Form #214
DH	Day Hospital
Dx (Dx=d)	Diagnosis (Diagnosed)
EBTPU	Evaluation and Brief Treatment PTSD Unit
FTEE	Full Time Employee Equivalent
FY	Fiscal Year
INDVDLS	Individuals
LOS	Length of Stay
M	Mean
MH	Mental Health
N	Number
NEPEC	Northeast Program Evaluation Center
PCT	PTSD Clinical Team
PDP, PTSD Dom	PTSD Domiciliary Program
PRRP	PTSD Residential Rehabilitation Program
PSF	PTSD Status Form
PSU	PTSD Substance Abuse Unit
PTF	Patient Treatment File
PTSD	Posttraumatic Stress Disorder
PTSS	Posttraumatic Stress Syndrome
RCS	Readjustment Counseling Service
SA	Substance Abuse
SC	Service Connected
S.D.; SD; STD	Standard Deviation
SEP	Special Emphasis Program
SIPP	Specialized Intensive PTSD Program
SIPU	Specialized Inpatient PTSD Unit
SOPP	Specialized Outpatient PTSD Program
SUPT	Substance Use PTSD Team
Tx	Treatment
VA	Dept. of Veterans Affairs
VAMC	Dept. of Veterans Affairs Medical Center
VHA	Veterans Health Administration
VISN	Veterans Integrated Service Network
WSDTT	Women's Stress Disorder Treatment Team
WSI-1	War Stress Interview - Part 1
WTRP	Women's Trauma Recovery Program

